

COUNTY BOROUGH OF BOOTLE.



ANNUAL REPORT
OF THE
MEDICAL OFFICER OF HEALTH
FOR
1938.

F. T. H. WOOD, O.B.E., M.D. (Lond), B.S., B.Sc., D.P.H.

Medical Officer of Health, School Medical Officer, Medical
Officer to the Public Assistance Committee, etc.

BOOTLE:

BOOTLE TIMES, LTD., 30, ORIEL ROAD

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BOOTLE TOWN COUNCIL, 1937-1938.

†*His Worship the Mayor (Mr. Alderman O'Neill, J.P.).

*Mr. ALDERMAN CLARK, J.P.	Mr. COUNCILLOR DUNN.
Mr. ALDERMAN CULLEN.	Mr. COUNCILLOR EVANS.
Mr. ALDERMAN HAWORTH, J.P.	Mr. COUNCILLOR GARDNER, J.P.
Mr. ALDERMAN JONES, J.P.	Mr. COUNCILLOR HACKETT.
*Mr. ALDERMAN KEENAN.	§*COUNCILLOR DR. HARRIS, J.P.
Mr. ALDERMAN D. J. KELLY.	†Mr. COUNCILLOR T. HARRIS, J.P.
Mr. ALDERMAN J. S. KELLY.	§*Mr. COUNCILLOR HARRISON.
†§*Mr. ALDERMAN KINLEY.	†*Mr. COUNCILLOR HOLDEN, J.P.
Mr. ALDERMAN MAGUIRE, J.P.	†*Mr. COUNCILLOR HUGHES.
†*Mr. ALDERMAN MAHON, J.P.	†Mr. COUNCILLOR KENNEDY.
Mr. ALDERMAN SMITH, J.P.	Mr. COUNCILLOR MAHON.
Mr. COUNCILLOR ABBOTT.	Mr. COUNCILLOR PATRICK, J.P.
Mr. COUNCILLOR ANDERSON.	†Mr. COUNCILLOR RAINFORD, J.P.
Mr. COUNCILLOR D. B. BLACK.	†Mr. COUNCILLOR REDDING.
Mr. COUNCILLOR R. A. BLACK.	Mr. COUNCILLOR RILEY, J.P.
§*COUNCILLOR DR. BROWN.	Mr. COUNCILLOR ROBINSON.
Mr. COUNCILLOR CAIN.	Mr. COUNCILLOR ROGERS, J.P.
Mr. COUNCILLOR CAMPBELL.	Mr. COUNCILLOR SKILLING.
†Mr. COUNCILLOR CLEARY.	†Mr. COUNCILLOR SMALL.
†Mr. COUNCILLOR M. CONNOLLY.	§*Mrs. COUNCILLOR SMITH, J.P.
†*Mr. COUNCILLOR T. CONNOLLY.	Mr. COUNCILLOR SPENCE, J.P.
Mr. COUNCILLOR CRAIG.	Mr. COUNCILLOR WEBSTER, J.P.
*Mr. COUNCILLOR CRIGHTON.	Mr. COUNCILLOR WILLIAMS.
†*Mr. COUNCILLOR CULLEN.	

* Member of Health Committee.

§ Member of Maternity and Child Welfare Sub-Committee.

† Member of Housing and Town Planning Committee.

HEALTH COMMITTEE.

Chairman—Mr. ALDERMAN KINLEY.

Deputy Chairman—COUNCILLOR DR. HARRIS.

MATERNITY AND CHILD WELFARE SUB-COMMITTEE.

Chairman—MRS. COUNCILLOR SMITH.

Deputy Chairman—Mr. ALDERMAN KINLEY.

This Committee consisted of members of the Health Committee (as indicated), together with co-opted members as follows:—

Mrs. J. GRANT and Miss H. PRESTON.

HOUSING AND TOWN PLANNING COMMITTEE.

Chairman—Mr. ALDERMAN MAHON.

Deputy-Chairman—Mr. COUNCILLOR CLEARY.

STAFF OF THE PUBLIC HEALTH DEPARTMENT.

Medical Officer of Health, School Medical Officer, Administrative Tuberculosis Officer, and Medical Superintendent of the Corporation Hospitals—

F. T. H. WOOD, O.B.E., M.D., B.S., B.Sc. (Lond.), D.P.H. (Durh.).

Deputy Medical Officer of Health and Deputy School Medical Officer—

G. J. ROBERTS, M.D., Ch.B. (Edin.), B.Sc. (Wales), D.P.H.

Tuberculosis Officer and Medical Officer of Isolation Hospital—

R. HANNAH, M.C., M.B., Ch.B. (Edin.), D.P.H.

Assistant Medical Officers of Health and Assistant School Medical Officers—

Miss M. B. CLARKE, M.B., Ch.B., D.P.H. (Liverpool).

J. V. WALKER, M.B., Ch.B. (B'ham), M.R.C.P. (Lond.), D.P.H.

School Dental Surgeons—

H. B. DAWES, L.D.S.

E. G. O'SHEA, B.D.S.

Corporation Hospital, Linacre Lane.

*Matron—*Miss S. L. BEVAN.

Maghull Sanatorium.

*Matron—*Miss E. HOLDEN, R.R.C.

Maternity Home.

*Matron—*Miss M. W. CLEARY.

Chief Sanitary Inspector, Inspector under the Food and Drugs Acts, and the Housing Acts, etc.—

¹W. ROBSON.

Sanitary Inspectors—

¹²B. J. HOLDEN.

¹²W. E. LEATHER.

¹²I. WILLIAMS.

¹²³E. E. JONES.

Clerical Staff—

H. A. BROWN, O.B.E. Miss WILSON. Miss BROWN. Miss THOMPSON. Miss MAXWELL,
Miss GREEN. Miss SMITH. Miss MULHALL, Miss COOKE, Miss GEORGE,
Miss HALPIN, Miss OLIVER, Miss MAHON, W. ROBINSON.

*Chief Clerk and Vaccination Officer—*N. LOCKWOOD.

Health Visitors—

456Mrs. MEREDITH.

456Miss F. M. HUGHES.

458Miss STARK.

14578Miss SKINNER.

458Miss WILD.

458Miss LYNCH.

458Miss ROBERTS.

458Miss COUNIHAN.

458Miss G. WILLIAMS.

School Nurses—

⁸Miss A. HUGHES.

⁸Miss THOMAS.

⁸Miss DAVIES.

⁸Miss C. HUGHES

(Orthopaedics).

*Tuberculosis Nurse—*⁸Miss KELLY.

Part-time Officers.

Medical Officer, Ante-Natal Clinic

P. MALPAS, F.R.C.S.

Medical Officer, Maghull Sanatorium

A. HENDRY, M.D.

Medical Officers, Venereal Diseases Clinic .

{ W. L. WEBB, M.B., Ch.B.

{ Miss R. NICHOLSON, M.B., D.P.H.

Ophthalmic Surgeon

E. ALLAN, M.B., Ch.B.

Throat Surgeon

C. YORKE, F.R.C.S.

Orthopaedic Surgeon

B. L. MCFARLAND, M.D.

Medical Officer, Aural Clinic

I. A. TUMARKIN, M.B., Ch.B., F.R.C.S.

Public Vaccinators

{ A. W. HANLON, M.R.C.S., L.R.C.P.

{ A. V. GLENDENNING, M.B., Ch.B., D.P.H.

Pathologist

Professor H. D. WRIGHT.

Analyst

Professor W. H. ROBERTS.

Veterinary Surgeon

HENRY SUMNER, M.R.C.V.S.

Rat Officer

W. BORROWS.

¹Certified Sanitary Inspector. ²Certified Inspector of Foods. ³Certified Smoke Inspector.

⁴Certified Health Visitor. ⁵Certified Midwife.

⁶Half-time Tuberculosis Visitor.

⁷Assistant Inspector of Midwives,

⁸Trained Nurse.

HEALTH DEPARTMENT,

TOWN HALL, BOOTLE.

May 1939.

*To the Mayor, Aldermen and Councillors
of the County Borough of Bootle.*

Mr. Mayor, Mrs. Councillor Smith, and Gentlemen,

I have the honour to present the sixty-sixth Annual Report on the work of the Health Department.

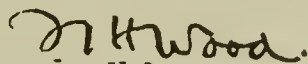
Attention may be directed to the following features of interest during the year:—

- (1) A persistence of the relatively high birth rate of the Borough at 20·1 per 1,000 of the population, a rate 33 per cent. in excess of that returned for England and Wales.
- (2) A slight rise in the death rate to 13·0 per 1,000 of the population.
- (3) A slight rise in the infant mortality rate to 81 per 1,000 births.
- (4) A decrease in the death rate from all forms of tuberculosis to 1·05 per 1,000 of the population, being a continuance of the slow improvement in this regard.

I have pleasure in recording my indebtedness to the Chairman and members of the Health Committee, and in acknowledging the continued good service of my colleagues during a year in which heavy additional responsibilities in connection with Civil Defence have been laid upon the Department.

I have the honour to be,

Your obedient servant,



Medical Officer of Health.

STATISTICAL SUMMARY FOR 1938.

Population (Registrar-General's estimate) at mid-year 1938 ...	74,080
Area in Acres (exclusive of river bed)	1946.5
Population at Census of 1931	76,770

Census.	Per occupied dwelling.	
	No. of persons.	No. of families
1911	5.6	1.12
1921	5.6	1.17
1931	5.03	1.18

Inhabited houses (end of 1938) according to Rate Books ...	16,809
Uninhabited houses (end of 1938) according to Rate Books ...	259

	Total.	Males.	Females.	
Live Births—Legitimate ...	1504	778	726	
Illegitimate ...	46	19	27	
Total ...	1550	797	753	Birth Rate 20.1

Still Births, 71.	Rate per 1,000 total (live and still) births	43.8
Deaths	960	Death Rate 12.96
Number of women dying in, or in consequence of, childbirth—		

	Deaths	Rate per 1,000 total (live and still) births
Puerperal sepsis	—	Nil.
Other puerperal causes ...	1	0.61
Death Rate of Infants under one year of age per 1,000 live births—Legitimate, 78; Illegitimate, 174	Total	81
Deaths from Measles (all ages)		20
Deaths from Whooping Cough (all ages)		7
Deaths from Diarrhoea (under 2 years of age)		6
Death Rate from Respiratory Tuberculosis per 1,000		0.94
Death Rate from all forms of Tuberculosis per 1,000		1.05
Natural increase of the population during the year		590
Number of deaths of Infants (under the age of one year) ...		126

The Rateable Value of the Borough as at 1st April 1938 was £519,071
The estimated product of a Penny Rate for 1938-39 £1950
In 1938-39 the General Rate was 13/9d. in the pound (excluding water rate and charges).

The cost of the Health Services during 1938-39 was estimated at £38,728, equivalent to a rate of 1s. 7.85d. in the pound.

COUNTY BOROUGH OF BOOTLE.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH

I.—VITAL STATISTICS.

Population. — At the Census in 1881 the population enumerated was 27,374; in 1891, 49,217; in 1901, 58,556; in 1911, 69,876; in 1921, 76,487; and in 1931, 76,770.

On April 29th 1939, the Registrar-General intimated that his estimate of population at mid-year 1938 was **74,080**, a decrease of 610 from the previous year, and this figure has been used in calculations of statistics throughout this report. It is, however, not easy to reconcile this estimated reduction of 2,690 since the 1931 Census with the known facts that the annual number of births in the Borough has been virtually stationary, that the excess of births over deaths has been 5,083, and that the number of occupied houses has increased by 1,418.

Births.—During the year there were registered 1,550 births to Bootle parents, representing a birth-rate of **20·1 per 1,000** of the population, that for England and Wales being 15·1. In 1937 the Bootle birth-rate was 22·0 and for the decennium 1928-1937 it was 22·1. There were 797 males and 753 females. It will be noted that the birth-rate, which reached a post-war maximum of 29·7 in the first quarter of 1920 is this year the lowest figure recorded. The national birth-rate, which has always been lower than that of Bootle, shows a small rise.

Period.	BOOTLE.		ENGLAND & WALES.
	Total Births.	Rate per 1,000.	Rate per 1,000.
1873—1880 ...	6,846	38·6	35·4
1881—1890 ...	15,508	36·8	32·4
1891—1900 ...	17,716	33·2	29·9
1901—1910 ...	20,468	32·3	27·2
1911—1920 ...	20,748	27·6	21·8
1921—1930 ...	18,884	22·8	18·4
1931 ...	1,667	21·6	15·8
1932 ...	1,768	22·9	15·3
1933 ...	1,652	21·4	14·4
1934 ...	1,644	21·4	14·8
1935 ...	1,636	21·4	14·7
1936 ...	1,688	22·2	14·8
1937 ...	1,640	22·0	14·9
1938 ...	1,550	20·1	15·1

The illegitimate births numbered 46, and were 3·0 per cent. of the total. In 1937 the total number was 63, and in 1936, 50.

Deaths.—The total number of deaths of Bootle residents during 1938, whether within or without the Borough, was 960; this figure includes 72 who died in institutions within the Borough, 411 who died in transferred institutions in Liverpool, 37 who died in hospitals outside the Borough, and 9 who died in mental hospitals, making a total of 529 deaths in institutions. The death-rate for 1938 was, therefore, **13·0 per 1,000** of the population, as compared with 12·8 in 1937, and 13·6 in 1936.

The death-rate in Bootle for the decennium 1921-1930 was 13·5, and for 1911-1920, 17·1. The crude death-rate of the 126 great towns of England and Wales during 1938 was 11·7. The table below demonstrates the general downward trend of both national and local rates since the beginning of the century.

Period.	BOOTLE.		ENGLAND & WALES
	Total Deaths.	Rate per 1,000.	Rate per 1,000.
1873—1880 ...	3,823	21·7	21·2
1881—1890 ...	8,260	19·9	19·1
1891—1900 ...	10,942	20·6	18·2
1901—1910 ...	11,400	17·8	15·4
1911—1920 ...	12,470	17·1	14·3
1921—1930 ...	10,336	13·5	12·1
1931 ...	1,140	14·8	12·3
1932 ...	1,027	13·3	12·0
1933 ...	1,075	13·9	12·3
1934 ...	990	12·9	11·8
1935 ...	980	12·8	11·7
1936 ...	1,037	13·6	12·1
1937 ...	953	12·8	12·4
1938 ...	960	13·0	11·6

The death-rate during the first quarter of the year was 16·2, during the second, 14·4; the third, 9·5; and the fourth, 12·6.

The number of deaths which occurred in institutions was 529, *i.e.*, 55 per cent. of the total deaths, as compared with 62 per cent. in 1937, and 58 per cent. in 1936. The increasing use made of institutions for the accommodation of cases of terminal illness is illustrated by the above figures, which compare with a percentage of 29 in 1920.

Comparability of Crude Death Rates. — If the populations of all areas were similarly constituted as regards the proportions of their sex and age group components, their crude death rates (deaths per 1,000 population) could be accepted as valid comparative measures of the mortalities experienced by the several populations.

In practice, however, populations are not thus similarly constituted and their crude death rates fail as true comparative mortality indexes in that their variations are not due to mortality alone but arise also

from differences in their population constitution, the two elements being combined in indistinguishable proportions. In order to isolate the mortality factor it is first necessary to identify and remove the population variable.

For this purpose the Registrar-General has supplied a "Comparability Factor" by which the crude death rate of the area should be multiplied in order to make it comparable, from a mortality point of view, with the crude death rate of the country as a whole or with the mortality of any other local area, the crude death rate of which should be similarly modified with its own factor for the purpose.

In the case of Bootle the comparatively youthful nature of the population results in the comparability factor being 1.18 with a rise in the adjusted death rate to 15.3. The standardised death rate based upon the constitution of the 1901 population as regularly used by the Registrar-General in his annual reviews is, however, 12.5, a lower figure than the crude death rate.

Mortality in Relation to Sex.—There were 505 deaths of males, and 455 of females. This represents a male excess mortality of approximately 19.3 per cent. after allowing for the smaller proportion of males in the population. The causes chiefly accounting for male excess are in order of importance, violence (including suicide), nephritis, congenital debility and malformation (including premature birth), other respiratory diseases, venereal diseases, tuberculous meningitis, rheumatic fever, cirrhosis of liver, and general paralysis of the insane.

Mortality in Relation to Old Age.—The following table demonstrates the fact that people are surviving until later ages, and shows that the number of people surviving to the age of 65 and over has increased to such an extent this century that 40.1 per cent. of the deaths in Bootle at the present day are of persons aged 65 or over, whereas in the first decade of this century the contribution to the general death-rate made by persons over 65 was only 15.5 per cent. In other words, two in every five may expect to live to 65, as compared with one in seven thirty years ago.

Period.	DEATHS.		Percentage over 65 Years.
	Total.	Over 65 Years.	
1901—1905 ...	5,671	849	14·8
1906—1910 ...	5,729	923	16·1
1911—1915 ...	6,259	1,197	19·1
1916—1920 ...	6,211	1,304	21·0
1921—1925 ...	5,230	1,352	25·8
1926—1930 ...	5,106	1,533	30·1
1931 ...	1,140	396	34·7
1932 ..	1,027	349	34·1
1933 ...	1,075	390	36·2
1934 ...	990	329	33·2
1935 ...	980	343	35·0
1936 ...	1,037	385	37·1
1937 ...	953	355	37·3
1938 ...	960	385	40·1

An examination of the ages at death of individuals in this age-group shows that there were 104 deaths at years 65 to 70, 113 deaths at years 70 to 75, 77 at years 75 to 80, 59 at years 80 to 85, 22 at years 85 to 90, 8 at years 90 to 95, and 2 at age 96 years.

Infantile Mortality.—There were 126 deaths of infants, compared with 127 in 1937, and 115 in 1936. The infantile mortality rate was **81 per 1,000** births, compared with 77 in 1937, and 85·2 in the decennium of 1928-1937. An examination of the factors underlying infantile mortality during the year is made on page 72.

The rate of infantile mortality amongst males was 89, and amongst females 73. Throughout England and Wales the rate of infantile mortality was 53 per 1,000 births, and in the 126 great towns it was 57.

The great decline in the infantile mortality rate began substantially in the decennium 1901-1910, during which period active measures were first instituted to secure such a reduction. The following table is again introduced to demonstrate in terms of lives saved what in fact such a decline really means.

DEATHS OF INFANTS UNDER ONE YEAR.

Years.	Actual recorded Deaths.	Number which would have been recorded had the rate of mortality observed over 1901-10* still prevailed.	Saving.
1911—1915 ...	1434	1596	162
1916—1920 ...	1031	1474	443
1921—1925 ...	912	1480	568
1926—1930 ...	793	1314	521
1931 ...	159	247	88
1932 ...	152	262	110
1933 ...	146	241	95
1934 ...	126	243	117
1935 ...	150	242	92
1936 ...	115	250	135
1937 ...	127	243	116
1938 ...	126	229	103

* Rate of mortality 1901-1910 was 148 per 1,000 births.

From the above table it will be seen that in the decennium 1921-1930 Bootle saved 1,089 infant lives over and above what it was saving in the relatively good decennium 1901-1910, with further savings of 856 during the eight subsequent years.

Thirty-nine children died before they were a week old, and a total of 58, or 46 per cent., of all the deaths under one year, occurred in children under the age of one month. This is a neo-natal mortality rate of 37·4 per 1,000.

Young Child Mortality.—In 1938 there were 45 deaths of children aged 1 to 5 years, as compared with 42 in 1937. The principal causes were—measles 15, whooping cough 6, diphtheria 6, pneumonia 3, tuberculosis 2, and violence 2.

Uncertified Deaths.—Sixty-eight deaths (48 of residents and 20 of non-residents) were the subject of a Coroner's inquest, while in 31 cases the death was registered without certification by a medical man or a Coroner; this is equivalent to 3·2 per cent. of deaths uncertified.

CAUSES OF DEATH.

The causes of death, classified according to age, are shown in the table on page 71. The table following sets out the principal certified causes of death,

Year 1938.	No. of Deaths.	Proportion per 1,000 Deaths	
		Bootle, 1938.	England & Wales, 1937.
Diseases of heart and circulation ...	165	172	254
Bronchitis, pneumonia and other respiratory diseases	148	154	102
Cancer, malignant diseases	141	147	131
Tuberculosis (all forms)	78	81	56
Diseases of the nervous system	78	81	78
Prematurity and congenital debility ...	44	46	30
Violence	26	27	45
Diseases of digestive system	17	18	38

Epidemic Diseases. — The epidemic diseases (excluding influenza) were responsible for 52 deaths, as compared with the average of 68·8 during the preceding ten years. There were 20 deaths from measles, as against 4 in 1937; 17 deaths from diphtheria, as against 14 in 1937; 7 deaths from whooping cough, as against 8; 1 death from scarlet fever, as in the previous year; none from enteric fever, as against 2 last year. The deaths from diarrhoea and enteritis were 7, as against 15 during 1937; 6 were of children under two years of age.

Respiratory Diseases. — The death-rate from respiratory diseases was lower than that recorded in the two preceding years. Pneumonia was responsible for 97 deaths, bronchitis for 42, and other respiratory diseases for 9, making the total deaths from respiratory diseases (excluding influenza and tuberculosis) 148, or 15·4 per cent. of the total deaths at all ages, as compared with 194, or 20·4 per cent. in 1937. Influenza was entered as a cause of death in 2 cases, as against 19 in the preceding year.

Cancer.—Cancer was registered as the cause of death in 141 cases, as compared with 124 in the preceding year. This represents a cancer crude death-rate of 1·90 per 1,000 of the population as compared with 1·01 during the years 1911 to 1920, with 0·78 per 1,000 during the first ten years of this century, and with 0·55 during the ten years 1891 to 1900. The corresponding rate for England and Wales in 1937 was 1·63, and in part the rise in incidence is a measure of the greater proportion

of persons of higher age in the population, for a characteristic of malignant disease is its special tendency to attack those over middle age.

ECONOMIC CONDITIONS.

Valuable information as to economic conditions having a bearing on the health of the town is obtained from data kindly supplied by the Clerk to the Public Assistance Committee, by the Ministry of Labour, and by the Clerk to the Bootle Insurance Committee.

It appears that during the year 1938 £60,307 was expended in outdoor relief, including £5,289 to unemployment cases (comparable figures for 1937 were £74,727 and £18,504). Further, the annual return of persons in receipt of Poor Relief on the night of 1st January 1939, shows 464 persons to have been in receipt of institutional relief, of whom 81 were persons not suffering from sickness, accident, or bodily or mental infirmity, and 4,124 persons to have been in receipt of domiciliary relief, of whom 210 were relieved on account of unemployment. The total number of persons in receipt of Poor Relief on 31st December 1938 was equivalent to 616 per 10,000 of the population, as compared with 647 in 1937.

Returns of the Ministry of Labour show that at the undermentioned dates the following numbers of insured men and women were recorded as unemployed and resident in the Borough, namely:—

				Men.	Women.
28th January 1935	...	...	...	6,741	810
15th April 1935	...	...	...	6,999	710
22nd July 1935	...	...	...	6,334	768
21st October 1935	...	...	...	7,048	812
20th January 1936	...	...	...	6,968	899
27th April 1936 ...	...	...	...	6,632	782
20th July 1936 ...	...	...	...	6,393	771
26th October 1936	...	...	...	5,902	765
16th January 1939	...	...	...	5,365	730

Returns from the three local "Clearing Houses" show a monthly approximate unemployed average of 5,051 men and 564 women; the averages for boys and girls are respectively 479 and 178, but for these last two groups it is not possible to say what percentages are actually resident in Bootle.

The following table summarises conditions as to unemployment and public assistance for the past nine years:—

Year.	Approximate monthly average of unemployed adult males.	Persons in receipt of relief on 1st January.		Total cost of outdoor relief.
		Institutional	Domiciliary	
1930	9202	481 (31/3/30)	2484	£ 36,268
1931	7598	475	2864	47,865
1932	7013	375	3936	64,999
1933	6926	455	5659	82,843
1934	6476	431	6871	107,807
1935	6780	410	7270	113,130
1936	6389	548	6751	109,747
1937	5146	511	6586	74,727
1938	5051	480	4354	60,307

As regards National Health Insurance, the total number of insured persons in the Borough on 1st October 1938 was 31,902, or 43 per cent. of the total population. There was a small decrease in the number of prescriptions made up during the year. It will be recalled that the number of prescriptions dispensed for insured persons rose from 50,738 to 164,253 between 1921 and 1937, with a corresponding increase in the annual cost of medicines—from £1,955 to £5,149 6s. 5d., while this year the experience is 158,766 prescriptions at a cost of £5,068 9s. 1d. In this connection it has many times been pointed out that there is no reason to think that such consumption of medicine is necessary or desirable in the best interests of the health of the people.

II. GENERAL PUBLIC MEDICAL TREATMENT.

The control of the transferred medical services remains with the Public Assistance Committee, although in November 1931 the Council delegated to the Health Committee the powers contained in Part I of the Local Government Act, 1929, with respect to the provision of hospital accommodation.

INSTITUTIONAL ACCOMMODATION FOR THE SICK.

By agreement continuing until April 1950 arrangements have been made for the reception of Bootle sick into the hospitals transferred to the Liverpool City Council after the passing of the Local Government Act, 1929.

During the year the total admissions, including 521 births, to the transferred hospitals numbered 4,323, of which figure, it may be noted, 2,380 were admissions on the orders of medical superintendents, implying urgent conditions in which it was inadvisable to go through the ordinary routine of application to a Relieving Officer. In the form in which weekly returns are received it is not easy to ascertain with certainty the number of sick persons (hospital or infirmary patients) as contrasted with those not in need of medical service, but it appears that the average weekly totals of persons chargeable to Bootle in transferred institutions (including able-bodied adults) in the four quarters were respectively 514, 478, 492, and 457, with a weekly average of 485 during the whole of the year. These figures do not include mental patients chargeable to the Authority, the average weekly number of whom was 210 during the year.

The following table, prepared by the Medical Officer of Health of Liverpool at the request of the Ministry of Health, gives a classification of such sick on 31st December 1938:—

CLASSIFICATION OF SICK IN INSTITUTIONS.

Classification of Wards.					Men	Women	Children under 16 years of age	Total
								106
1.	Medical	...	...	..	49	52	5	50
2.	Surgical	...	...	...	21	27	2	41
3.	Chronic Sick*	...	...	...	18	23	—	62
4.	Children	...	...	...	—	—	62	4
5.	Venereal	...	...	..	3	—	1	16
6.	Tuberculosis	...	...	..	10	2	4	1
7.	Isolation	...	...	..	—	—	1	17
8.	Maternity	...	...	..	—	17	—	
9.	Mental—							
	(a) Lunacy Act, 1890 --							
	(i) Short Stay							
	(ii) Long Stay							
	(b) Mental Treatment Act				30	19	—	49
	(i) Voluntary	...	...	..	
	(ii) Temporary	...	...	..	
10.	Mental Defectives	...	...	..	—	—	—	—
11.	Other	...	...		—	—	—	—
Totals ...					131	140	75	346

* Patients needing hospital treatment because they are suffering from some chronic disease; also aged infirm persons whose medical and nursing needs approximate to those of chronic patients.

DOMICILIARY MEDICAL ATTENDANCE.

The administration of medical out-relief included in the functions transferred to the Council on 1st April 1930 is controlled by the Public Assistance Committee acting through the Medical Officer of Health. For this purpose the Borough remained divided into three Districts, Districts Nos. 1 and 2 being under the care of part-time District Medical Officers throughout the year, while in District No. 3 domiciliary medical attendance was provided by a panel of local practitioners. Drugs and medical requisites for District No. 3 were dispensed on prescriptions made up by local chemists at charges assessed by the South-West Lancashire and Cheshire Joint (Prescriptions) Committee; such requirements for Districts Nos. 1 and 2 were dispensed at Cyprus Grove by the Council's part-time dispenser until 1st October 1938, after which date the whole borough had open choice of chemists.

More than a four-fold increase in the demand on the services of the District Medical Officers has taken place since the transfer of Poor Law duties to the Council in 1930, and the average weekly attendances for medical treatment in the fourth quarter of the year numbered 611 in 1938, as compared with 167 in 1930.

Examination of the returns of surgery consultations and home visits during the year showed the weekly average to have been 195 surgery consultations and 16 home visits in District No. 1, 68 consultations and 9 visits in District No. 2, and 267 consultations and 41 visits in District No. 3.

Open Choice System.—The open-choice system has been established in District No. 3 as from 1st April 1936 when local practitioners agreed to provide domiciliary medical service at a remuneration of 3/6 per person treated per quarter. The scheme supplies public assistance patients with medical and dispensing services, rendered by practitioners of their own choice, and of the standard provided under National Health Insurance Acts; it reduces to a minimum the association with the Poor Law, such association being limited to satisfying the Relieving Officer that the patient is eligible to receive domiciliary medical relief; and it is elastic in its ability to cope with the fluctuating demand for medical service.

VACCINATION.

According to information supplied by the Vaccination Officer, 1,191 successful primary vaccinations and four successful re-vaccinations were performed during the year ended 30th September 1938, as compared with the previous year's figures of 1,244 and five respectively.

Appendix 17 presents the Annual Return of the Vaccination Officer respecting vaccination of children whose births were registered from 1st January to 31st December 1937, inclusive.

III. SANITARY CIRCUMSTANCES.

Water Supply.—The Borough derives its water supply from the Liverpool Corporation Waterworks, which normally distribute to the district water from the Prescott Storage Reservoirs consisting of a mixture of the Rivington and Vyrnwy supplies; on occasion a small proportion of pumped water from the Green Lane wells is mixed with water from the above sources. Bacteriological reports consistently showing the absence of coliform organisms in 100 c.c., and the virtual absence or presence in single figures only per c.c., of bacteria at 37°C, illustrate the high degree of purity of the water.

Drainage and Sewerage.—The sewerage system is entirely by discharge into the River Mersey, with drainage areas and outfall as described in the Report for 1930.

Closet Accommodation and Scavenging.—Every house, with the exception of three in the outlying parts of Orrell, is provided with one water closet or more, the conversion of middens having been completed in 1910. Similarly all houses are provided with ashbins, the conversion of ashpits having been completed in 1932.

SANITARY INSPECTION OF THE DISTRICT.

The Staff for this work consists of the Chief Sanitary Inspector with five assistants, one of whom is engaged principally on special duties in connection with food inspection.

Nuisances.—On page 84 will be found a tabular statement showing the number of inspections made, and notices served by the Chief Sanitary Inspector. It will be noted that the number of nuisances for

which notices were served on owners and occupiers was 5,268, as against 3,813 in 1937; the other work done under the Housing Acts is set out in the Housing Section of this report on pages 63 to 67.

Conditions in Offices.—In addition to the 114 business premises reported upon last year, further 53 premises were inspected this year in regard to overcrowding, ventilation, cleanliness, sanitary accommodation, etc., making a total of 167 premises, comprising 611 office rooms. Appendix 9 classifies the results of inspections made of these offices, both this year and last year, and shows in general the satisfactory position. Of the premises so inspected, none were found to be overcrowded, 8 rooms were found to have unsatisfactory ventilation, in 20 rooms the unaided natural lighting was unsatisfactory, while at only 5 of the premises was the sanitary accommodation found to be unsatisfactory, and in every office room a satisfactory standard of cleanliness was observed; suitable action was taken to effect improvements where necessary.

Fertilisers and Feeding Stuffs Act, 1926.—Ten samples of feeding stuffs and two samples of fertilisers were obtained during the year.

Rag Flock Acts, 1911 and 1928.—There are no premises in the Borough where rag flock is manufactured, sold, or used.

Rats and Mice Destruction Act, 1919.—The occupiers of food shops, cafes, etc., have been frequently advised during the year as to the best means of ridding the premises of rats, and, in some cases, alterations of shops, and concreting of floors have been undertaken with excellent results.

For National Rat Week in November advertisement of the fact of the responsibility of occupiers was inserted in the local Press, and requests were sent to horse keepers, millers, warehouse owners, etc., to make special efforts during the week; there were also displays in prominent positions within the borough of informatory posters issued by the Ministry of Agriculture, and the circulation of a pamphlet giving suggestions as to suitable methods of ridding their premises of rats.

Common Lodging Houses. — There are four Common Lodging Houses in the Borough. They are all registered for the accommodation of men only, and between them have 168 beds. They were regularly inspected and a satisfactory standard of cleanliness was noted.

Canal Boats.—During the year 88 visits of inspection were made to canal boats on the Leeds and Liverpool Canal in the Borough. No written notice was served during the year, and one defect was remedied after verbal caution had been given. Bootle is not a Registration Authority.

Verminous Infestation.—During the year the problem of the infestation of dwellings by bed-bugs has continued to receive careful attention. In vacant houses found to be badly affected the procedure has been the same as described in detail in the last report, while in vacant houses where the infestation was found to be slight, a modified treatment on similar lines was carried out.

Of 143 vacant weekly tenancy municipal houses inspected, 58 or 40 per cent., were found to be verminous, while of 65 leasehold municipal houses inspected following surrender of the lease, 8 or 12 per cent. were found to be in a verminous state, and of 54 occupied municipal houses, inspection of which was requested, 24 or 44 per cent., were infested.

In the case of three occupied municipal houses found to be very badly infested, it was deemed advisable to secure a thorough and complete disinfection both of the houses and of the furniture and household effects of the tenants, and to secure this the tenants were accommodated temporarily in a clean, vacant municipal house—after their furniture had been treated with hydrogen-cyanide, and the family bedding steam disinfected—while their own houses were being fumigated; on completion they were moved back to their former residence, the whole operation being carried out in each case within seven days.

The following table shows the number of houses treated during the year:—

Municipal Houses.				Privately-owned Houses.			
Vacant.		Occupied.		Vacant.		Occupied.	
Full Treat-ment.	Modified Treat-ment.	Full Treat-ment.	Modified Treat-ment.	Full Treat-ment.	Modified Treat-ment.	Full Treat-ment.	Modified Treat-ment.
58	8	9	15	—	—	—	25

As to new houses, all tenants before taking up occupation of municipal houses have their furniture and effects treated with hydrogen-cyanide at the Council's fumigation station at Pine Grove; the furniture is loaded into a container, taken to the fumigation station for five hours' treatment, and delivered the same day to the new residence completely freed of vermin; the bedding is disinfected by steam.

Evidence of the success of the treatment is afforded by the fact that 162 tenants whose furniture and effects were dealt with during the year have been re-visited at intervals of six weeks, and careful inspection has failed to reveal any recurrence of the infestation.

Further evidence of the success of the methods employed is seen in the fact that on re-inspection in December 1938 of 32 municipal houses, scattered over the various housing estates, all of which were fumigated between October and December 1937, and have been in occupation by the same tenants since that date, all but two houses were found to be clear. Further, six houses, on the Marsh Lane site, which have been occupied continuously since 1935, by families displaced from the Pleasant View Clearance Area, showed no evidence of any verminous infestation at the end of the year.

Occupied houses, both municipal and privately owned, found to be the subject of infestation by cockroaches, were dealt with as described in the last report. One hundred and twenty houses were treated, of which 5 were privately owned, and 115 owned by the Corporation.

Smoke Abatement.—Under Section 2 of the Public Health (Smoke Abatement) Act, 1926, a bye-law was made by the Council in December 1930 enacting that the emission of black smoke for a period of two minutes in the aggregate within any continuous period of thirty minutes from a chimney other than that of a dwelling house shall be presumed to be a nuisance.

There are approximately 81 industrial chimneys in the Borough, to which some 89 boilers of all types are connected. In eleven instances mechanical stokers of modern design are fitted, and in four instances oil fuel is in regular use; in addition there are some twelve furnaces used for metal smelting.

During the year 73 observations of chimneys were made, and in 16 instances smoke was noted as emitted in excessive quantities; in each case the premises were visited by the inspector, who investigated the cause and advised as to prevention. Intimation notices were also served in nine instances.

Shops Act 1934.—Under Section 10, which requires the provision of suitable arrangements for the health and comfort of shop-workers, 110 shops were visited during the year, and as a result improvements over the whole period can be summarised as follows:—

Provision of sufficient sanitary conveniences	50
„ „ „ washing facilities	42
„ „ facilities for taking meals	16
„ „ suitable ventilation	32

Factories Act, 1937.—The Factories Act of 1937 which came into force on 1st July 1938 continues in general outline the previous allocation of duties as between the staffs of the Home Office and of the Local Authority. The distinction between factory and workshop is abolished, and only one term, “factory,” is employed, although a distinction is drawn between factories where mechanical power is used, and those where it is not used. It may be noted that it is now the duty of the local authority to enforce, in the case of all factories, the provision as to sanitary conveniences. The general rule that every factory shall be kept in a clean state is supplemented by two new requirements, as laid down in Section I of the Act (a) that accumulations of dirt and refuse shall be removed daily from floors and benches of workrooms and from staircases and passages and (b) that the floor of every workroom must be cleaned at least once a week by washing, or if it is effective and suitable, by sweeping or other method.

In addition to the general provision which requires a reasonable temperature to be maintained in every workroom, there are new requirements which apply to all workrooms in which a substantial proportion of the work is done sitting and does not involve serious physical effort. The requirements are (a) a temperature of not less than 60°F. must after the first hour be maintained while work is going on, and (b) at least one thermometer must be provided in a suitable position in such workroom.

In view of the extension of duties of the Local Authority, an additional inspector has been engaged to assist in making an inspection of all factories within the Borough.

SWIMMING BATHS.

The management of the two public baths in the Borough and the measures adopted to ensure a satisfactory condition of the water at the Marsh Lane Baths remain as described in the Annual Report for 1935.

At the Balliol Road Baths the installation of a continuous filtration-aeration-sterilization plant has been completed and it is now in operation.

IV. SANITARY CONTROL OF THE FOOD SUPPLY.

One of the Sanitary Inspectors holding the special Food Certificate of the Royal Sanitary Institute is engaged for a large part of his time on work connected with the food supply, the sanitary supervision of which is undertaken in order to secure cleanliness in the preparation and distribution of foodstuffs, and to diminish the risk of possible infection thereof with disease-producing bacteria.

MILK SUPPLY.

Source of Milk Supply.—That portion of the milk supply of the Borough not brought by rail or road is derived from cows kept in shippons, of which there are now 14 in the town; the cows number approximately 190, a further decrease from the pre-war figure of about 550. All the shippons received the careful attention of the Inspector, who paid 115 visits to them during the year. It is estimated that about one-sixth of the Bootle milk supply is derived from cows kept in these town shippons.

Dairies and Cowsheds.—*Milk and Dairies Orders 1915 and 1926.*—There are 56 premises registered as dairies or milkshops in the Borough, and 14 premises registered as cow-sheds, and there are 85 registered retail purveyors of bottled milk only. Five hundred and twenty-eight visits of inspection were made to cowsheds and dairies during the year, and in many cases as a result of suggestions made and advice given alterations were carried out with resulting improvement in condition; on the whole it may be said that these premises are maintained in a satisfactory state.

Cleanliness and Safety of Milk.—The Milk (Special Designations) Order which came into force on June 1st 1936, prescribed the following special designations for milk, namely:—Tuberculin Tested, Accredited,

and Pasteurised, and abolished the previous designations—Certified, Grade “A” (Tuberculin Tested), and Grade “A.” Tuberculin Tested milk is derived from cows which have passed a veterinary examination and a tuberculin test, and must satisfy a prescribed methylene blue reduction test for cleanliness, and further must contain no coliform bacilli in one-hundredth of a millilitre. Accredited milk is raw milk from cows which have passed a veterinary examination, and must satisfy the same bacteriological tests as are prescribed for tuberculin tested milk. Pasteurised milk has to be retained at a temperature of not less than 145° and not more than 150° Fahrenheit for at least thirty minutes, and then be immediately cooled to a temperature of not more than 55° Fahrenheit; it shall contain not more than 100,000 bacteria per millilitre. At the end of 1938 there were three Bootle dairymen holding licences to produce Accredited milk, and one dairyman holds a licence to bottle Accredited milk.

With the object of promoting the cleanliness and safety of the local supply, bacteriological examination of milk samples has not been limited to the designated milks, and 100 examinations in all were made during the year. The results in 78 samples of milk, other than pasteurised, may be summarised thus:—

(a) Of 33 samples of Accredited Milk, 26 were up to standard, four did not satisfy the methylene blue test and failed to conform to the requirements of the absence of coliform bacilli in one-hundredth of a millilitre, and three failed in one or other respects.

(b) Of 45 samples of ordinary milk, 19 were of “Accredited” standard by both tests, 13 satisfied the methylene blue requirement for “Accredited,” and 13 were unsatisfactory as to the presence of coliform bacilli.

Milk and Tuberculosis.—The results of bacteriological examination of 101 samples of milk showed that seven samples were infected with tubercle bacilli. In two instances the milk was produced from cows in Bootle shippons, and cows were sold from the herds and slaughtered between the dates when the samples were taken and the dates of the reports by the bacteriologist; further examination, both veterinary and bacteriological, showed the remaining cows in the herds to be free from infection. In the remaining five samples, the milk was produced at farms in the Lancashire County area, and in two instances the infected cow was traced and slaughtered under the Tuberculosis Order, but in the remaining three cases the source of infection could not be traced.

Pasteurised Milk.—Previous annual reports have drawn attention to the fact that under present circumstances the ordinary raw milk supply cannot be regarded as safe, and that cleanly production is no safeguard against infection conveyed in the milk from a tuberculous cow.

During the past year in Bootle two licences were renewed for the production of pasteurised milk. The number of milk samples obtained from these two licence holders during 1938 was 22, of which 20 conformed to the requirements of the Ministry of Health. Seventeen samples of pasteurised milk were submitted for examination by the Phosphatase test, of which number thirteen were found to be efficiently pasteurised.

Arrangements for Veterinary Inspection.—The new Agriculture Act, 1937, Part IV, which came into force on April 1st 1938, provided by Section 19 (1) of the Act for the transfer of the functions of veterinary inspectors of local authorities to veterinary inspectors appointed by the Minister of Agriculture and Fisheries. At the same time there came into operation the Milk and Dairies Amendment Order, 1938, and the Milk (Special Designations) Order, 1938. The former revoked Articles 8, 9, and 10 of the Milk and Dairies Order, 1926, dealing with the inspection of cattle by veterinary inspectors, and the latter made certain amendments of and additions to the Milk (Special Designations) Order, 1936, chiefly in respect of production of designated milks, and of pasteurising establishments. In addition to the periodical examination of licensed herds by veterinary inspectors of the Ministry, the routine examinations of all dairy herds will be undertaken by the Ministry's inspectors as often as circumstances will permit.

The transfer of veterinary functions made necessary a revision of the Tuberculosis Order of 1925. The Tuberculosis Order of 1938 made by the Minister of Agriculture and Fisheries came into operation on April 1st 1938, and revoked the Order of 1925, and its amending Orders, and provides *inter alia* for the slaughter of affected cattle and for payment of compensation by the Minister of Agriculture and Fisheries instead of by the local authority as was the practice formerly.

PREPARATION OF ICE CREAM.

Bootle Corporation Act, 1930, Section 21, requires the registration of persons and premises used for the manufacture, etc., of ice cream, and gives powers for revocation of the registration of such persons if the Corporation is satisfied that the public health is, or is likely to be endangered by any act or default of such persons.

At the end of the year the registrations totalled:—

PREMISES—

For the manufacture for sale and sale of ice cream ...	67
For the sale only of ice cream ...	66

PERSONS—

For the manufacture for sale and sale of ice cream ...	67
For the sale only of ice cream ...	76

These special powers of supervision were obtained because of the necessity of ensuring the wholesomeness of milk products eaten largely by children, and during last season 81 visits of inspection were made to registered premises, and 40 samples were obtained and submitted for bacteriological examination as affording at present the most reliable index of the degree of cleanliness reached in the production of the ice cream. The following table sets out the results of such examinations.

BACTERIAL COUNTS IN ICE CREAM.

Year.	No. of Bacteria per c.c.				Coliform Bacilli.	
	Over 1,000,000	Between 500,000 and 1,000,000	Between 100,000 and 500,000	Under 100,000	Absent in 1/100 c.c.	Present in 1/100 c.c.
1938	—	8	3	29	28	12
1937	—	7	3	20	17	13
1936	9	4	3	14	15	15
1935	2	6	5	11	11	13
1934	3	1	8	3	4	11
1933	6	3	7	6	6	16
1932	4	2	1	12	10	9

MEAT AND OTHER FOODS.

Butchers' Shops.—There is no slaughterhouse in the Borough, and the inspection of meat is confined to butchers' shops, food factories and cold stores. There are 83 butchers' shops, to which 842 visits of inspection were made during the year. On 26 occasions unsound and diseased meat was found in shops and food factories; the bulk of the

diseased meat had been previously inspected outside the Borough, in which cases the authorities concerned were notified. In general the standard of cleanliness of butchers' shops in the Borough is high.

Public Health (Meat) Regulations, 1924.—It was necessary on 20 occasions to warn tradesmen respecting contraventions of the Regulations. Frequent visits of inspection are made to shops and premises, and vehicles containing meat are regularly inspected for general cleanliness.

Public Health Act, 1925.—Under Section 72, which provides for the cleanliness and sanitary conditions of premises where food is prepared or stored for sale it was necessary on 8 occasions to serve notices on occupiers of premises in respect of unsatisfactory conditions.

Merchandise Marks (Imported Goods) No. 7 Order, 1934. — This Order requires the marking of imported meats with an indication of origin on exposure for sale, *e.g.*, Brazil, Argentine, New Zealand; and is a safeguard for the buying public inasmuch as imported frozen or chilled meat are appropriately marked. Some 291 visits of inspection were made, and except in a very few cases, the provisions of the Order were observed.

Merchandise Marks Act, 1926.—The Act provides for the marking of imported food stuffs (fresh apples, butter, currants, raisins, sultanas, eggs, raw tomatoes, and honey). Some 178 visits of inspection were made under this Act, and except in comparatively few instances the origin of the produce was found to be indicated.

Fishmongers' Shops. — There are 26 shops in the Borough from which fresh fish is sold, and 109 visits of inspection were made during the year. These shops are maintained in satisfactory condition.

Fish Frying Shops.—The trade of fish frying is carried on at 55 shops, to which 112 visits of inspection were made during the year. Suggestions were made from time to time to occupiers regarding methods of preparation, installation of ranges, etc., and considerable improvement resulted, and although there are no bye-laws in force in the Borough with respect to these premises, they are maintained in a satisfactory condition.

Disposal of Unsound Food.—The amount of unsound food detected is shown in the following table; all was voluntarily surrendered, and disposed of as described in the last report.

					Tons.	Cwts.	Qrs.	Lbs.
Raw Meat	...	...	...	...		13	1	1½
Canned Meat	...	...	...	...	1	9	2	22½
Canned Fruit	...	...	...	...	1	18	1	21½
Raw Fish	...	...	...	...				11
Canned Fish	...	...	...	...		6	2	22¼
Canned Milk	...	...	...	...	2	19	0	21½
Canned Beans	...	...	...	...		1	2	3
Jam	...	...	...	...			3	8
Canned Peas	...	...	...	...		1	2	11
Canned Oranges	...	...	...	...		1	0	8
Pickles	...	...	...	...			2	2
Canned Tomatoes	...	...	...	...		1	0	27½
Cheese	...	...	...	...		1	1	25
Total					7	15	3	7¾

Food Factories.—There are 16 food factories in the Borough and systematic inspection is carried out, 137 visits of inspection having been made during the year. Although maintained in a very satisfactory condition, on occasions warnings were given respecting lack of cleanliness of the premises. Forty-one premises are now registered under the Bootle Corporation Act, 1920, as used for the preparation of potted or preserved foods.

Bakehouses.—There are 20 bakehouses (5 being underground) and 22 confectionery bakehouses. 122 visits of inspection were made during the year. The general condition is good.

Cold Stores.—These premises are regularly inspected and are maintained in satisfactory condition; 28 visits were made. One of the stores is a registered egg store, but no marking of shell eggs under Regulations of the Ministry of Agriculture was undertaken during the year.

Food and Drugs (Adulteration) Act, 1928.—The Public Analyst, to whom samples are submitted, is Mr. W. H. Roberts, M.Sc., F.I.C.

Table 10, on page 88, shows that 255 samples were taken, of which 22, or 8·6 per cent., were adulterated or not up to standard. Two hundred and thirty-six of these were taken informally, and in cases

where adulteration was detected formal samples were subsequently obtained, in order that the necessary legal action might be instituted. One hundred and nineteen samples of milk were obtained, of which one hundred and two were taken informally; in the other seventeen cases, however, the procedure prescribed by the Act was carried out. Eighteen of the samples of milk (9 formal, 9 informal) were found to be adulterated.

Of the nine formal samples of milk found to be adulterated, legal proceedings were instituted in one instance against a vendor for selling milk which contained 5 per cent. added water. A fine of £1 was imposed.

In another instance a sample taken from a vendor was found to be slightly watered, following which a sample taken from the wholesaler supplying the vendor was also found to be slightly watered. A sample taken in course of delivery from the farmer to the wholesaler was similarly found to be slightly watered. Enquiries made at the farm resulted in the detection of a slight leak in the cooler, which was made good; and further samples taken in course of delivery were found to be genuine. The farmer was advised to make frequent examinations of the cooler.

In respect of another sample, being one taken from a local cow-keeper and found to be deficient in milk fat, an appeal to cow sample which followed was also found to be deficient in milk fat. In the course of enquiries made at the farm, it was ascertained that the times of milking and periods between the morning and afternoon milkings were irregular, and accordingly samples were taken from each of the eleven cows comprising the herd, at both morning and afternoon milkings, with the result that from the morning milking, two cows gave only a milk which contained 3 per cent. of milk fat, while from the afternoon milking each of the cows gave a milk which had a fat content of 3 per cent. or more. As a result of these tests the farmer was advised to equalise as nearly as possible the period of milking between morning and afternoon. The farmer agreed to this procedure, and after some ten days of milking at regular times and at approximately twelve-hour intervals, bulk samples were taken at both morning and afternoon milkings, with the result that the sample of milk in each case exceeded the standard laid down by the Sale of Milk Regulations, 1901, *i.e.* 3 per cent. milk fat and 8.5 per cent. other solids. Further bulk samples taken at a later date proved to be up to standard.

In the remaining instances, the adulteration being slight, the vendors were interviewed and cautioned.

Legal proceedings were instituted against a vendor for selling sausages which contained only 31 per cent. of meat, which on the generally accepted standard meat content of not less than 50 per cent. showed the sample to be deficient in meat to the extent of 38 per cent. The vendor was fined 40s. with £6 6s. 0d. costs. The magistrates ruled that 50 per cent. of wholesome meat should be in any sausage.

The total number of samples obtained of milk produced outside the district was 70, of which 33 were taken in course of delivery.

The Public Analyst has kindly supplied the results of the analysis of every sample of milk submitted to him from Bootle, and it is interesting to note that, including the samples returned "not genuine," the average amount of fat was 3.56 per cent. and of non-fatty solids 8.83 per cent., the minimum standard fixed by the Board of Agriculture in the Sale of Milk Regulations, 1901, being 3 per cent. fat and 8.5 per cent. non-fatty solids, below which figure milk is presumed to be not genuine.

Twelve samples of condensed milk were submitted to the analyst, who certified they were all genuine and correctly labelled as provided by the Public Health (Condensed Milk) Regulations, 1923-1927.

Public Health (Preservatives, etc., in Food) Regulations, 1925-1927.—A reference to Table 11, on page 89, shows that 207 samples were examined under these Regulations for the presence of preservatives, including 119 of milk. All the samples were found to be correct.

V. PREVALENCE OF INFECTIOUS DISEASES.

The number of cases of infectious diseases notified during the year is briefly summarised below, and fuller detail is given in Table 2, page 70.

There was no notification of small-pox, cholera, plague, typhus fever, relapsing or continued fever, trench fever, malaria, dysentery, or encephalitis lethargica.

	Cases notified.	Cases admitted to hospital.	Deaths.
Enteric Fever	1	—	—
Scarlet Fever	338	233	1
Diphtheria	270	269	17
Puerperal Pyrexia	2	—	1
Ophthalmia Neonatorum	11	—	—
Erysipelas	61	29	1
Infantile Diarrhoea (under two years)—voluntarily notifiable .	8	1	6
Influenzal Pneumonia	10	6	—
Acute Primary Pneumonia	124	43	51
Cerebro-spinal Meningitis	6	6	—
Poliomyelitis	1	6	—
Tuberculosis—			
(a) Pulmonary	127	78	70
(b) Non-Pulmonary	57	13	8

SCARLET FEVER.

Incidence. — The last outbreak of scarlet fever on a large scale occurred in 1933; this was followed by a period of low prevalence until the fourth quarter of 1936, when there was a short period of relatively high incidence, repeated again in the fourth quarters of 1937 and 1938. The total of cases for the year was 338, constituting an incidence of 4·4 per 1,000 of the estimated population compared with 3·10 in 1937, and a rate of 2·41 per 1,000 for England and Wales.

Mortality.—There was one death from scarlet fever during the year; this is equivalent to a mortality rate of 0·01 per 1,000 of the population, as compared with 0·01 per 1,000 for England and Wales. The table below shows that Bootle, in common with other areas in South West Lancashire, has usually returned higher scarlet fever mortality-rates than the country as a whole, although the experience of the last eight years is equivalent to a reduction to one-twelfth of the rate obtaining at the end of last century, and to one-thirty-fifth of the rate of sixty years ago.

Period.	BOOTLE.		England & Wales.
	No. of Deaths.	Rate per 1,000	Rate per 1,000.
1873-1880 ..	188	1·06	0·73
1881-1890 ...	165	0·39	0·34
1891-1900 ...	202	0·37	0·16
1901-1910 ...	160	0·25	0·11
1911-1920 ...	70	0·11	0·05
1921-1925 ...	36	0·09	0·03
1926-1930 ..	22	0·05	0·01
1931-1935 ...	12	0·03	0·01
1936 ...	2	0·03	0·01
1937 ...	1	0·01	0·01
1938 ...	1	0·01	0·01

In each of thirty-two houses two cases of scarlet fever occurred, and in five houses there were three cases.

Hospital Isolation in Scarlet Fever.—Two hundred and thirty-three Bootle cases, or 69 per cent. of the cases notified, were admitted to Linacre Hospital, with one death.

Return Cases. — During 1938 there were four instances in which the discharge of scarlet fever cases from the hospital was followed by the occurrence of a new case or cases in the home. The return case rate was equivalent to 1·8 per cent. of those discharged, as compared with 1·1 per cent. in 1937.

DIPHTHERIA.

Incidence.—The period of relatively high diphtheria incidence dating from 1927 came to an end in 1936, but during the last quarter of 1937 and the first quarter of 1938 the incidence again rose; it fell during the summer but rose again in the last quarter, when 96 cases were notified; in all 270 cases were notified as compared with 263 during 1937, and an average of 214 for the ten years ended 1938. The incidence was 3·52 per 1,000 of the estimated population, and the case fatality was 6·3 per cent. Two hundred and sixty-eight, or 99 per cent. of those notified, were removed to hospital. Five cases required tracheotomy during the year; two recovered.

The occurrence of a secondary case of diphtheria in an infected household was recorded on seventeen occasions, and the occurrence of a third case on two occasions.

Mortality.—The table which follows demonstrates the gravity of the type of infection, due apparently to infection with a more virulent organism producing rapid and severe toxæmia, which prevailed locally in 1938.

Period.	BOOTLE.		England & Wales.
	No. of Deaths.	Rate per 1,000.	Rate per 1,000.
1875-1880 ...	43	0·24	0·13
1881-1890 ...	92	0·22	0·16
1891-1900 ...	136	0·24	0·32
1901-1910 ..	120	0·18	0·19
1911-1920 ...	132	0·18	0·14
1921-1925 .	32	0·08	0·09
1926-1930 ..	39	0·09	0·08
1931-1935 ...	92	0·24	0·07
1936 ...	8	0·10	0·07
1937 ...	14	0·18	0·07
1938 ...	17	0·23	0·07

Prevention.—During 1932 a scheme was inaugurated whereby an offer of immunisation against diphtheria was made to the parents of infants and young children in the Borough. Such protection can be conferred without risk to the child and without any disturbance of health by the administration of three injections at, say, fortnightly intervals of a toxoid-antitoxin mixture which stimulates the body to produce immunity against subsequent exposures to infection; the immunity is not absolute and is not produced instantaneously, but increases steadily through a period of several weeks or months.

The following tabular statement classifies the children who completed the series of inoculations during 1938, making, with those inoculated in the preceding years, a total of 5,533.

Place of Treatment.				Total.
Elementary Schools	...	...	...	616
Infant Clinics	...	...	...	150
Linacre Hospital	...	...	...	1
Total ...				767

During 1938 there were seven instances of diphtheria contracted by children who had previously received three protective inoculations; particulars of these cases are given in the table below:—

Age.	Date of notification.	Period between last inoculation and onset of illness.	Remarks.
6 years	10/2/38	13 months	A case of nasal diphtheria, sore nostril only, no membrane. 4,000 units serum given.
11 years	17/2/38	5 years	Faucial diphtheria of severe type. 40,000 units serum given. K.L.B. + throat.
6 years	20/2/38	14 months	Diagnosed as faucial diphtheria, and 10,000 units serum given. Clinically, however, there was no more than slight follicular tonsillitis.
3 years	6/4/38	5 days	Fairly severe faucial lesions with either broncho-pneumonia or membrane in bronchial tubes. 20,000 units serum given.
7 years	6/9/38	2 years	K.L.B. + throat. Only a small speck of exudate on one tonsil. Not definite clinical diphtheria.
5 years	16/12/38	3 months	Slight nasal discharge and K.L.B. + nose. Not clinically diphtheria. 4,000 units serum given.
7 years	18/12/38	13 months	Mild faucial diphtheria, only small patch on one tonsil. K.L.B. + throat. 10,000 units serum given.

OTHER INFECTIOUS DISEASES.

Influenza.—Ten notifications of influenzal pneumonia were received, and 2 deaths from influenza were recorded.

Measles.—During 1938 measles caused twenty deaths, compared with four in 1937, and an average of 18 during the ten years ended 1937. The Bootle death-rate from this cause was 0·27 per 1,000, compared with 0·04 throughout England and Wales.

Complete information as to the incidence of measles is not now available, but during the year 268 cases occurring in school children were reported under the Bootle Corporation Act, 1920, 265 of these being in the first quarter of the year.

The table which follows sets out the reduction in the mortality from measles which has occurred throughout England and Wales since 1890; it also shows that although some degree of reduction has been obtained locally the measles death rate for Bootle is still high, and comparison with the corresponding tables for scarlet fever and diphtheria demonstrates the greater importance of measles as a killing disease.

Period.	BOOTLE.		England & Wales.
	No. of Deaths.	Rate per 1,000.	Rate per 1,000.
1891-1900 ...	165	0·30	0·41
1901-1910 ...	294	0·45	0·31
1911-1920 ...	266	0·37	0·28
1921-1925 ...	112	0·27	0·12
1926-1930 ...	85	0·20	0·10
1931-1935 ...	116	0·30	0·07
1936 ...	8	0·10	0·07
1937 ...	4	0·05	0·02
1938 ...	20	0·27	0·04

Whooping Cough.—Whooping Cough caused 7 deaths during 1938 compared with 8 in 1937 and 7 in 1936. The death-rate was 0·09 per 1,000 of the population, compared with 0·03 throughout England and Wales. Efforts were continued to educate the public to appreciate the fact that measles and whooping cough (so-called minor infectious diseases) are responsible year by year for many preventable deaths.

Diarrhoea.—Deaths from this disease numbered 7, or a rate of 0·09 per 1,000 of the population as compared with 0·20 last year. Six of the deaths occurred in children under the age of two years, giving a rate per 1,000 births of 3·9 in Bootle as compared with 5·5 throughout England and Wales.

The arrangements instituted in previous years by which this disease is notifiable during the third quarter of the year were continued, and 8 notifications were received, as compared with 16 in 1937, and 11 in 1936. The receipt of these notifications enabled instruction on the necessary sanitary precautions against the spread of infection to be given by the Infant Welfare Visitors, as well as nursing attention to be given by the Bootle District Nurses' Association.

LINACRE ISOLATION HOSPITAL.

Linacre Isolation Hospital, by arrangements with the respective Authorities, receives cases of infectious diseases from the urban districts of Litherland and Formby, as well as from the borough.

The year 1938 again showed an increase in cases admitted, the total being 650 as against 542 in 1937 and 385 in 1936. The following table gives particulars of the cases admitted to the infectious disease wards, while particulars of cases in which the diagnosis was revised are given in Appendix 18, page 96.

CASES TREATED IN THE INFECTIOUS DISEASE WARDS, LINACRE HOSPITAL.

DISEASE.	No. in hospital on 1st. January 1938				No. admitted during the year.				No. discharged during the year				No. died during the year				No. remaining in hospital 31st. December 1938.			
	Bootle	Lither- land	Formby	Total	Bootle	Lither- land	Formby	Total	Bootle	Lither- land	Formby	Total	Bootle	Lither- land	Formby	Total	Bootle	Lither- land	Formby	Total
Scarlet Fever.	17	3	1	21	217	45	14	276	202	46	15	263	1	—	—	1	31	2	—	33
Scarlet Fever complicated by other disease.	1	—	—	1	8	1	—	9	9	—	—	9	—	1	—	—	—	—	—	—
Admitted as Scarlet Fever but diagnosis revised.	1	—	—	1	8	3	—	11	9	3	—	12	—	—	—	—	—	—	—	—
Diphtheria.	31	—	10	41	207	33	8	248	190	23	18	231	14	1	—	15	34	9	—	43
Diphtheria complicated by other disease.	1	—	—	1	4	—	—	4	5	—	—	5	—	—	—	—	—	—	—	—
Admitted as Diphtheria but diagnosis revised.	2	1	—	3	58	14	1	73	56	15	1	72	—	—	—	—	4	—	—	4
Other diseases	2	—	—	2	29	—	—	29	31	—	—	31	—	—	—	—	—	—	—	—
TOTALS	55	4	11	70	531	96	23	650	502	87	34	623	15	2	—	17	69	11	—	80

Tracheotomy was performed on five occasions during the year; two cases recovered.

Cross-Infection.—The following cases of cross-infection arose during the year. Two cases of diphtheria contracted chicken-pox and two cases contracted scarlet fever; four cases of scarlet fever contracted chicken-pox, one case of scarlet fever contracted measles and chicken-pox, four cases of scarlet fever contracted measles, and one case of scarlet fever contracted mumps.

Health of Staff.—Staff sickness was as follows during the year. One nurse contracted measles and was warded 12 days; one nurse was warded 26 days as a case of diphtheria, although the only clinical signs were those of follicular tonsillitis with a positive swab; another nurse, who had been Schick-negative, contracted diphtheria and was warded 88 days; and a wardmaid contracted measles and was warded 10 days.

During the year twenty-three nurses were Schick-tested and Dick-tested to determine their susceptibility to diphtheria and scarlet fever. Of these, eight re-acted positively to the Schick-test and five re-acted positively to the Dick-test; the susceptible nurses were immunised.

Bacteriological Laboratory Work—

Examinations required.	Positive result.	Negative result.	No. of Specimens examined.
Swabs for Diphtheria ...	855	4960	5815
Sputa for Tubercle Bacilli	198	801	999
	<hr/> 1053 <hr/>	<hr/> 5761 <hr/>	<hr/> 6814 <hr/>

In addition, 101 samples of milk, 611 specimens for venereal disease, and 110 miscellaneous specimens and samples (including 40 of ice cream) were examined in the Pathological Department of the Liverpool University or other Pathological Laboratory.

VI. TUBERCULOSIS.

Notification Register.—The Tuberculosis Notification Register contains the names of all persons notified as suffering from tuberculosis since the first operation of the Public Health (Tuberculosis) Regulations, 1911, after making corrections by the removal of names of those

who have died, left the district, have been cured, or have been pronounced not to be suffering from tuberculosis. The register on 31st December 1938 included 275 males and 235 females suffering from pulmonary tuberculosis, and 119 males and 146 females suffering from non-pulmonary tuberculosis, making a total of 775 cases.

Incidence.—The total number of new cases coming to the knowledge of the Medical Officer of Health during 1938 was 184, as compared with the figures of 246, 242, 212, 251, 258, 231, 208, and 201 in the years from 1930 onwards.

The following table sets out the age and sex distribution of notifications and deaths due to tuberculosis during the year under review:—

Age Periods	New Cases notified				Deaths.			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M	F	M	F	M	F	M	F
0—1 year ...	...	...	2	...	...	...	2	...
1—5 years ...	...	2	5	8	...	...	2	...
5—15 „ ...	4	4	10	13	1	1	2	...
15—25 „ ...	9	29	4	11	10	9	...	2
25—35 „ ...	13	16	1	4	5	12	...	...
35—45 „ ...	14	8	2	2	12	3	..	...
45—55 „ ...	11	2	...	...	8	8	...	.
55—65 „ ...	9	5	...	...	3	8	...	...
65 and upwards	1	...	...	...	...	...	...	...
Totals ...	61	66	24	33	39	31	6	2

Mortality.—The number of deaths caused by tuberculosis during 1938 was 78, or one death in every twelve, giving a death-rate from this cause of 1·05 per 1,000 of the population, as compared with 1·11 in 1937 and 1·34 in 1936; it was 1·32 for the ten years ended 1937.

This represents a continuance of the decline in the tuberculosis mortality-rate recently recorded in Bootle, and set out in the following table :—

Period.	BOOTLE.		England & Wales.
	No. of Deaths.	Rate per 1,000.	Rate per 1,000.
1891-1900 ...	1106	2·17	2·01
1901-1910 ...	1127	1·76	1·65
1911-1920 ...	1370	1·82	1·42
1921-1925 ...	652	1·70	1·08
1926-1930 ...	572	1·49	0·94
1931-1935 ...	537	1·39	0·81
1936 ...	102	1·34	0·69
1937 ...	83	1·11	0·69
1938 ...	78	1·05	

From the above table it may be calculated that in the last eight years the deaths from tuberculosis in Bootle have been 486 less than would have been the case if the mortality rate experienced in 1891-1900 had continued.

Dispensary Register.—A register is maintained of all cases of tuberculosis receiving public medical treatment. This Dispensary Register contains the names of all persons attending at, or seen in connection with, the Dispensary for diagnosis or for treatment of tuberculosis, including patients under general supervision (whether or not accompanied by domiciliary treatment), and patients or observation cases in residential institutions, and contacts. On December 31st 1938 the number of persons so classified and on the register was 534, as against 558 on January 1st, 1938.

PULMONARY TUBERCULOSIS.

Incidence.—One hundred and twenty-seven new cases suffering from pulmonary tuberculosis were notified during 1938. The number includes 26 cases not formally notified. The numbers notified in the

five preceding years were 173, 173, 145, 166, and 143 respectively. In the case of seven the first intimation was obtained from the death returns, while in twelve other cases notification was made at intervals of less than three months before death. The non-notified deaths, therefore, numbered 10 per cent. of the total of 70 deaths from pulmonary tuberculosis. Enquiry into these non-notified cases showed the omission to have been on the part of institution medical officers.

Mortality.—During the year 70 deaths were certified to be due to pulmonary tuberculosis, representing a rate of 0·94 per 1,000 of the population, as compared with 0·98 in 1937 and 1·15 in 1936. The age period most affected was early adult life with 36 deaths between the ages of 15 and 35, and the usual sex disparity was shown, there having been 39 deaths among males and 31 among females.

Tuberculosis Visitors: Home Visitation.—Five tuberculosis visitors, one of whom assists in the medical work of the Dispensary, and three of whom are engaged also on work in connection with Maternity and Child Welfare, are responsible for the sanitary supervision of the homes of notified and suspected cases. Every effort is made by the Visitors to make their calls helpful to the comfort of the patient and a stimulus to the care exercised in preventing infection of others in the household. The visits totalled 2,424 (1,869 of which were for dispensary purposes) in the year under review.

Housing of Tuberculosis Cases.—A significant factor in the production of new cases of tuberculosis is the prolonged contact of young children with a patient or other inmate of the house who is suffering from pulmonary tuberculosis in an infectious stage; such prolonged contact is obviously obtained when such a case shares a bedroom with other persons. An estimate of the extent to which such a position exists in the Borough can be formed by consideration of the following table showing the sleeping accommodation, as at 31st December 1938, available for all infectious cases of pulmonary tuberculosis.

1. Number of infectious cases of pulmonary tuberculosis on Dispensary register at the end of the year	...	...	222
2. (a) Number of infectious pulmonary cases not occupying a separate bed at home	...	...	67
(b) Less number of foregoing cases in 2 (a) isolated in sanatoria and pulmonary hospitals	...	...	5

- | | |
|--|------|
| 3. Net number of infectious pulmonary cases at the end of the year living at home and not occupying a separate bed | 62 |
| 4. Percentage of infectious pulmonary cases at home at the end of the year not occupying a separate bed | 27.9 |

Rent Assistance Scheme. — With a view to reducing the risks of child infection, the Council since April 1935 has had in operation a scheme for (a) the allotting of houses by the Housing Committee to cases of infectious pulmonary tuberculosis who contract to comply with the simple health requirements of the Tuberculosis Officer, first amongst which is the sole occupation of a bedroom by the patient, and (b) the establishment in cases so housed of a scheme of rent assistance by the Health Committee, whereby the superior accommodation, and hence the protection of the healthy members of the family, is obtained without detriment to the nutritional needs of the family.

At the end of the year there were 28 families comprised within the scheme, the total rent subsidy then being borne by the Health Committee amounting to £3 14s. 4d. weekly. In addition, one patient recommended awaits allocation of a house.

Tuberculosis Dispensary.—The Dispensary is the central element of the tuberculosis scheme, and serves as a clearing house from which some cases are transferred to sanatorium, others to hospital, and others to their own medical attendant for domiciliary treatment, while a certain proportion remain in attendance at the clinics held nine times fortnightly and receive necessary treatment therefrom. As far as possible, however, this last aspect of the functions of the Dispensary is limited to the provision of specialist treatment not at the disposal of the general practitioner.

During the year 272 new cases, of which 125 were sent by private practitioners, 19 by the Public Assistance Medical Officers, 21 by the Maternity and Child Welfare Clinic Medical Officers, and 33 by the School Medical Officers for opinion preliminary to notification, were examined at the Dispensary. Attention continued to be paid to securing the attendance for examination of contacts of notified cases, and during the year 151 were so examined,

The total attendances at the Dispensary during the year numbered 3,029, and 2,532 visits for various other purposes were made in addition; 632 specimens of sputum were examined, giving a positive result in 78 cases.

Radiographic Examinations.—Since the installation of an X-ray apparatus at the Health Centre in June 1934 increased use has been made of radiography in diagnosis and control of treatment. During the year the total of X-ray examinations numbered 703, and the cost of materials and maintenance (excluding electric current and capital charges) was approximately £120; this position compares with a total of 208 examinations done for the dispensary by outside authorities during 1933-34 at a total cost of approximately £224. The average number of X-ray examinations made is now 901 per 100 deaths from tuberculosis, as compared with 88 per 100 in 1931 and 695 per 100 in 1937.

Maghull Sanatorium.—During the year 37 patients were admitted to the Sanatorium with an average length of stay of 175 days for the 34 cases discharged during the year. Information is given in Section (G) on Form T.145 of the Ministry of Health on pages 76 and 77 of the results of treatment in Maghull Sanatorium and Linacre Hospital during the year.

Linacre Hospital Tuberculosis Pavilion.—During 1938, 45 Bootle cases were admitted to the Pavilion, the average length of stay of the 38 cases discharged (including 12 deaths) during the year being 160 days.

Artificial Pneumothorax Treatment.—Treatment by induction of artificial pneumothorax, in order to secure collapse of the affected lung, was adopted at Linacre Hospital first in 1924, in cases selected on lines described in the Annual Report for 1935.

Thirty-four cases have so far been considered suitable for this treatment. Eleven of the cases have died, six have left the district, and a tabular statement gives the results of treatment in the other cases.

RESULTS OF ARTIFICIAL PNEUMOTHORAX TREATMENT.

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Number.	Beginning of treatment	Cessation of treatment	Length of treatment	Other treatment given	Condition to date	Time since treatment ceased
2.	18/7/25	25/4/27	21 months	Hospital	Not examined recently; known to be working	11½ years
4.	11/12/26	—	6 years	Sanatorium	In Papworth Village Settlement. Working.	5 years
6.	18/10/29	9/1/32	27 months	Hospital	In Papworth Village Settlement. Working.	7 years
13.	2/5/33	7/2/34	9 months	Hospital	Disease of chronic type; still active.	57 months
14.	27/7/33	1/9/34	13 months	Hospital	Disease arrested. Is working.	52 months
17.	21/12/34	—	—	—	Treatment discontinued 3/2/37. Disease quiescent. Working full time.	22 months
18.	24/7/35	24/9/35	2 months	—	Died 25/4/38.	—
21.	4/10/35	—	—	—	Still having refills. Good general condition.	—
24.	31/7/36	—	—	Hospital	At home. Very ill. Treatment discontinued since 6/8/37.	—
26.	12/11/36	—	—	Hospital	Died 10/4/38.	—
27.	29/1/36	—	—	Hospital	Refills being continued. Good general condition.	—
29.	14/7/37	—	—	Hospital	Refills discontinued 24/9/38. Good general condition. Fit for work.	—
30.	6/8/37	—	—	Hospital	Still in hospital. Refills being continued, and has had right phrenic crush performed 11/6/38.	—
31.	18/1/37	—	—	Sanatorium	Refills being continued. Good general condition.	—
32.	20/9/38	—	—	Hospital	Collapse only partial. Phrenic crush performed 5/11/38. Refills being continued. In hospital.	—
33.	29/11/38	—	—	Hospital	In hospital. Refills being continued.	—
34.	5/11/38	—	—	Hospital	Right phrenic section. Some improvement, but disease still active. In hospital.	—

NON-PULMONARY TUBERCULOSIS.

During the year 57 new cases of non-pulmonary tuberculosis were notified, as compared with 58 in 1937 and 42 in 1936, namely:—29 glands, 7 bones and joints, 5 meningitis, 3 kidney, 3 abscess, 9 abdominal, and 1 skin; and there were 8 deaths registered. The agreement with the Leasowe Hospital for Children for the maintenance of beds for children suffering from non-pulmonary tuberculosis remained in force, and at the beginning of the year 12 cases were in hospital; 2 cases were admitted, 7 were discharged, and seven were remaining in hospital at end of year.

The scheme for admission to general or special hospitals of cases of non-pulmonary tuberculosis, and for payment by the Council of the charges for maintenance and treatment in cases recommended or approved by the Tuberculosis Officer, was continued; during the year 8 such patients were admitted.

Dental Treatment.—During the year 8 cases received dental treatment and 5 cases were completed at a cost of £1 12s. 6d.; two cases ceased treatment, and one case was carried over to 1939.

Public Health (Prevention of Tuberculosis) Regulations, 1925.—No action was taken under the above Regulations relating to tuberculous employees in the milk trade.

Public Health Act, 1936, Section 172.—No action was taken under this Section dealing with the compulsory removal of cases of tuberculosis to hospital.

ARTIFICIAL LIGHT TREATMENT.

The scheme of artificial light treatment by exposure of patients to general irradiation from carbon arc lamps, which was commenced in October 1925, was continued during the year. The staff, plant and working method were as described in previous reports.

The operation time was approximately 329 hours for the carbon arcs; and 19 hours for the mercury vapour lamp. The attendances made by patients totalled 2,283, of which 431 were made by patients referred under the Tuberculosis Scheme and 1,852 by patients referred under the Maternity and Child Welfare Scheme.

The attached tabular statement classifies conditions for which treatment was administered and the results obtained in the period under review.

RESULTS OF ARTIFICIAL LIGHT TREATMENT.

(a) TUBERCULOSIS.

	Under Treatment 1st Jan., 1938	New Cases	Discharged			Ceased to attend	Under treatment 31st Dec., 1938
			Much Improved	Im- proved	Station- ary		
Tubercular Cervical Glands... ..	8	4	3	—	1	3	5
Tuberculosis of Bones	1	—	—	—	—	1	—
Lupus	2	—	—	—	—	2	—

(b) MATERNITY AND CHILD WELFARE.

	Under Treatment 1st Jan. 1938	New Cases	Discharged			Ceased to attend	Under treatment 31st Dec. 1938
			Much Improved	Im- proved	Station- ary		
Rickets	33	89	4	24	12	37	45
Debility	9	34	1	11	3	16	12
Malnutrition	3	3	1	—	—	3	2
Totals	56	130	9	35	16	62	64

VII. VENEREAL DISEASES.

The Council's scheme for the treatment and control of venereal diseases provides for the maintenance of a treatment centre at the Bootle General Hospital, and for the conduct of pathological examinations at the University of Liverpool. In addition payment is made for services rendered to Bootle residents attending the venereal diseases treatment centres of the Liverpool City Council. At the Council's

Bootle Hospital treatment centre four clinics for men and two clinics for women and children are held weekly.

The Annual Statistical Report of the Medical Officer of the Treatment Centre will be found on pages 90 to 92. It shows 350 persons under treatment on 31st December 1938, as against 357 on 1st January 1938, and a decrease in new cases, the figures being 284 as contrasted with 321 in 1937.

The total attendances for treatment made at the Centre during the year show an increase from 12,701 to 12,902; the figure includes 3,648 attendances made between clinic days for the treatment of gonorrhoea at the irrigation centre. The average attendance at the male clinics was 59, and at the female clinics was 10. In-patient days totalled 244 as against 656 during the previous year. During 1938 113 cases were discharged on completion of treatment and observation, as contrasted with 127 during 1937.

The Table below is a statement of the number of cases presenting themselves for treatment during the last five years:—

BOOTLE VENEREAL DISEASES CLINIC.

	1934	1935	1936	1937	1938
New Cases (total)	309	327	274	321	284
New Cases (syphilis)	74	62	50	58	48
Total attendances (excluding Irrigation Department)	11616	11241	9633	9164	9254
Irrigation Department attendances	4035	3816	3491	3537	3648
In-patient Days	676	487	593	656	244
No. discharged after completion of observation and treatment	136	137	102	127	113
No. who ceased to attend after completion of treatment, but before final tests as to cure	63	78	56	105	144

Bootle residents accounted for 46 per cent. of the cases under treatment at the Bootle Hospital Centre, the Authorities contributing the next largest number of cases being the Lancashire County Council with 20 per cent., and Liverpool with 11 per cent.

Against this attendance of outsiders at the Bootle Centre there may be set off the user of Liverpool Centres by Bootle residents, and the following table summarises the available information as to the total number of cases of Bootle residents dealt with at the various local centres for the first time during 1938.

	NEW CASES—BOOTLE RESIDENTS.					
	Syphilis	Soft Chancre	Gonor- rhœa	Other Condi- tions	Total	Total Attend- ances
Seamen's Dispensary ...	2	3	25	24	54	1142
Royal Infirmary ...	2	—	4	7	13	495
Bootle General Hospital	22	2	79	29	132	6491
Mill Road Infirmary ...	7	—	11	9	27	858
Total ...	33	5	119	69	226	8986

The following table sets out the change in incidence of the venereal diseases locally, in so far as it can be measured by records of new cases presenting themselves for treatment at the Bootle Centre.

	NEW CASES ANNUALLY.					
	SYPHILIS.			GONORRHOEA.		
	Males.	Females.	Total.	Males.	Females.	Total.
1921-1925	123	41	164	166	6	172
1926-1930	63	19	82	176	20	196
1931	48	16	64	160	20	180
1932	53	23	76	185	25	210
1933	43	15	58	145	26	171
1934	47	27	74	120	31	151
1935	43	19	62	135	36	171
1936	37	13	50	121	27	148
1937	44	14	58	155	31	186
1938	34	14	48	140	28	168

When the table is examined it will be noted that there has been a large decrease in the number of new cases of syphilis since 1925, but little change in the number of cases of gonorrhœa which present themselves for treatment; it is probable that the figures represent a real fall in the incidence of syphilis.

VIII. MATERNITY AND CHILD WELFARE.

ANTE-NATAL WELFARE.

Home Visiting of Expectant Mothers.—A very great deal can be done to promote normal childbirth by careful instruction as to general

and personal hygiene and as to the need for suitable food, open air, exercise and rest, adequate sleep, and properly devised clothing. The Health Visitors paid 1,183 home visits and the Municipal Midwives paid 1,160 home visits to expectant mothers.

Ante-Natal Clinics. — The ready use of the facilities provided at the Ante-Natal Clinics in Bootle for medical supervision during pregnancy is well known to the Council, and this position was maintained during 1938. It may be recalled that the first Ante-Natal Clinic was established in Bootle in 1920, in which year expectant mothers equivalent to 8 per cent. of the total number of births came under public medical supervision. During 1938 four Ante-Natal Consultations were held each week, and in all 983 new cases attended, corresponding to 63 per cent. of the total registered births; in addition, 262 cases carried over from the preceding year continued under supervision, and a total of 4,683 attendances was made, with an average of 23·3 persons per consultation. Further, it should be noted that patients intending to enter Walton Hospital for confinement usually attend the Ante-Natal Clinic held at that institution.

Dental Treatment of Expectant and Nursing Mothers.—Three half-days weekly are devoted to the dental treatment of expectant and nursing mothers and the treatment given has been in the nature of extractions and the supply of artificial dentures.

The number of patients treated during the year was 412, as compared with 307 in 1937, and the estimated cost of dentures supplied was £161 0s. 6d., of which the patients' contributions were assessed at £64 8s. 0d. One hundred and thirteen cases were carried forward to 1939.

The following statement classifies the work done, including treatment of children under school age.

	Mothers.	Children under school age.
Brought forward from 1937	88	—
New cases	324	125
Cases completed	192	97
„ ceasing treatment	107	28
„ carried forward to 1939	113	—
Number of attendances	1525	125
„ „ extractions	2122	201
„ „ fillings	—	—
„ „ other operations	—	—
„ „ general anaesthetics	598	90
„ „ artificial dentures supplied	206	—
„ „ treatment sessions	131	—

MATERNAL WELFARE.

Nursing Homes Registration.—There is one Nursing Home proper within the Borough, as well as two Maternity Homes (with provision for eleven patients), on the register at the end of 1938. Bye-laws governing the conduct of these Nursing Homes were made by the Council in November 1931.

The Practice of Midwives.—The number of midwives resident in Bootle on the local roll at 31st December 1938 was 13, as against 18 in the preceding year; one other, resident outside the district, also gave notice of her intention to practise in the Borough; all are trained. The above figures do not include midwives practising in the Municipal Maternity Home.

Regulations of the Central Midwives' Board require medical help to be sought by the midwife in all cases of illness of the patient, or the child, or of any abnormality occurring during pregnancy, labour, or lying-in, and 256 records of sending for medical help were received. Twenty-one of the calls were on account of abnormalities during pregnancy, 178 during labour, including 68 cases of ruptured perineum, 15 during the puerperal period, and 42 for conditions affecting the child.

Under the 1918 Act the Local Supervising Authority is responsible for the payment of fees to doctors called in by midwives, and in 1938 210 accounts, totalling £305 4s. 6d., in respect of cases where the doctor himself was unable to recover the fee, were sent in, as compared with 206 accounts, totalling £336 4s. 3d., in 1937. In respect of this sum, the contributions to be recovered from the patients were assessed at £72 13s. 6d.

Midwives Act 1936, Section 5.—This section empowers midwives to surrender to the local supervising authority their certificates issued by the Central Midwives Board at any time until 31st July 1939, and empowers local supervising authorities to require surrender of such certificates in special circumstances; in all cases compensation based on past receipts from practice is payable. During 1938 two midwives made voluntary surrender of their certificates; compensation payable amounted to £438 9s. 6d., of which £61 6s. 3d. was recovered from neighbouring local supervising authorities in whose areas the midwives concerned had also practised.

Milk Assistance Scheme.—The Council's Milk Assistance Scheme, under which dried milk is granted on the Clinic Medical Officer's recommendation, to infants, and to expectant and nursing mothers, in necessitous cases falling within a certain income scale, continued in force. In all, milk to the value of £893 1s. 6d., and cod liver oil emulsion and maltoline to the value of £145 9s. 5d., making a total cost of £1,038 10s. 11d., were granted by the Council to infants and to nursing and expectant mothers, on the advice of the Medical Officer, as compared with £1,207 10s. 1d. in 1937.

Obstetric Consultations.—In 1926 the Council inaugurated a scheme for the services of a Consultant Obstetric Surgeon to be available to private practitioners in cases of puerperal sepsis, and in 1931 this service was extended to provide for the attendance of the Consultant, at the request of private practitioners for consultation, at the patient's own home, in respect of conditions arising (a) during pregnancy or puerperium, and (b) at parturition.

During the year consultations were asked for on three occasions during pregnancy, on two occasions during the puerperium, and on five occasions during parturition.

Institutional Provision for Maternity Cases.—As is the case elsewhere, an increasing number of mothers choose to go into public institutions for confinement, and last year 521 patients were delivered in Walton Hospital at the cost of the Public Assistance Committee, and 174 patients were delivered in the Municipal Maternity Home; in addition 54 patients were delivered in voluntary hospitals. The total of 749 represents 48 per cent. of the births registered during the year, as compared with 47 per cent. during 1937.

Maternity Home. — During the year 1938, 178 patients were admitted to the Maternity Home, the average duration of stay being 13·6 days; admissions in 1937 numbered 161. Three cases were treated for ante-natal supervision, 125 cases were delivered by the nursing staff, and 49 cases were delivered by doctors. Medical assistance was called in by the Matron on eleven occasions during labour, 24 times for rupture of the perineum, twice during the puerperium, and on three occasions on account of the condition of the infant. No cases were notified

as puerperal pyrexia. There were no cases of ophthalmia neonatorum. All the patients but three left the institution with their babies being breast-fed.

Cases delivered by forceps numbered nine or 5·1 per cent., as compared with 29·5 per cent. in a recently prepared examination of 14,614 cases delivered in private medical practice.

There were 8 foetal deaths (still-born or dying within 10 days of birth), in 3 of which the child was still-born.

One hundred and three of the patients were admitted in respect of their first confinement, and there were 33 cases of readmission to the Home of former patients, one of whom was admitted for the fourth time, and one for the fifth time. There were two sets of twin births.

Post-natal Supervision of the Mother. — Medical examination of mothers a few weeks after delivery, locally first instituted in 1929, has been continued, and during the year 73 patients, including three after abortion, attended post-natal clinics, as compared with 59 in 1937.

Advice on special or general matters of hygiene was given to all the patients and simple treatment was prescribed for such commonly occurring conditions as anaemia, debility, and constipation. Where examination disclosed conditions requiring further investigation or treatment, the patients were referred to the appropriate agencies.

Puerperal Morbidity and Mortality.—No deaths were registered from puerperal fever, but there was one due to accidental haemorrhage, confinement (premature), first pregnancy, still-birth. The circumstances of the confinement were investigated by the Medical Officer of Health, and a confidential report (not identifying the patient) was sent to the Departmental Committee on Maternal Mortality set up by the Ministry of Health.

The death thus classified to pregnancy and child-birth gives a maternal mortality rate of 0·61 per 1,000 (live) births, and the following table shows that although there have been fluctuations in this rate, the local experience has been more favourable than that of the country as a whole.

MATERNAL MORTALITY.
Deaths classed to pregnancy and childbearing.

Period.	BOOTLE.		ENGLAND & WALES.
	No. of Deaths.	Rate per 1,000 (live) Births.	Rate per 1,000 (live) Births.
1911-1920	66	3·13	4·07
1921-1925	31	3·10	3·90
1926-1930	26	2·73	4·28
1931	7	4·20	4·11
1932	6	3·39	4·21
1933	6	3·63	4·51
1934	7	4·26	4·60
1935	2	1·22	4·00
1936	4	2·37	3·81
1937	6	3·65	3·23
1938	1	0·61	2·97

MUNICIPAL MIDWIFERY SERVICE.

The Municipal Midwifery Service, staffed by eight whole-time midwives, is now well established and is working smoothly. The staff attended 550 patients during the year, delivering 501 as midwives and assisting in 49 other instances as maternity nurses. Midwives book their own patients and are responsible for their ante-natal care from then onwards; collection of fees is satisfactory, and on 31st March, 1939, the outstanding arrears constituted 7·1 per cent. only of sums due.

It will be seen that including maternity cases delivered in Walton Hospital and the Maternity Home, the municipality was responsible during 1938 for the conduct of three-quarters of the maternity work of the Borough.

Notification of Births.—The number of live births notified was 1,058; 62 were births to parents who normally resided outside the Borough. 1,046 notifications were received from midwives and 12 from doctors and parents. In addition 572 transfers of live births and 26 of still births to Bootle parents in Liverpool institutions were received. There were 43 still-births notified (including 2 to non-Bootle residents).

The babies were visited shortly after birth by the Infant Welfare Visitors, unless it was considered that suitable advice could be obtained from other sources. A summary of the work of the Infant Welfare Visitors is given on page 93.

Births Registered.—The number of live births registered in the district was 1,071, from which 95 are to be deducted as born in Bootle to residents of other districts, and to which are to be added 574 births to Bootle parents temporarily out of the town; the corrected figure is therefore 1,550. Of the number registered 61 were illegitimate.

Still-births.—The number of still-births registered in the district was 45; this figure corrected for 29 inward and 3 outward transfers gives a net total for the year of 71, as compared with 69 for 1937. As full an investigation as possible has been obtained in respect of each such case, and 22 of the foetuses were forwarded for pathological examination.

To obtain a complete picture of the true position as to infant mortality the still-births (which include deaths of infants both before birth and during the act of birth) should be added to the deaths of infants in their first twelve months of independent existence, and the following table is given with that end in view:—

Year.	DEATHS OF INFANTS.					
	Still Births.		Post-Natal.		TOTALS.	
	No.	Rate	No.	Rate	No	Rate
1926 ...	63	32	187	100	250	129
1927 ..	58	31	141	78	199	106
1928 ...	53	29	186	107	239	133
1929	65	38	138	83	203	118
1930 ...	84	45	141	79	225	120
1931 ...	64	38	159	95	223	134
1932 ...	92	52	152	86	244	138
1933 ...	76	44	146	88	222	132
1934 ..	71	41	126	77	197	118
1935	79	46	150	92	229	138
1936 ...	67	40	115	68	182	108
1937 ...	69	42	127	77	196	119
1938 ...	71	46	126	81	197	127

Infant Deaths.—There were 126 deaths of infants under the age of twelve months, which total expressed as a rate of 1,000 births gives an infant mortality rate of 81, compared with 77 during 1937.

The trend of infant mortality in recent years is set out in the following table:—

Years.	BOOTLE	England and Wales
1901-05	166	138
1906-10	130	117
1911-15	133	110
1916-20	103	91
1921-25	91	76
1926-30	89	68
1931-35	87	62
1936	68	59
1937	77	58
1938	81	53

Mortality was high during the first quarter, with 48 deaths registered as against 28 and 40 in the corresponding quarters of 1937 and 1936, but it was relatively favourable in the succeeding quarters, when 29, 21, and 28 deaths respectively were registered; the rise in the first quarter was due to an excess of respiratory diseases.

The most important of the causes of death, which are given in detail on page 72, were:—prematurity 33, bronchitis and pneumonia 31, convulsions 13, atrophy debility and marasmus 6, congenital malformation 5, and measles 5.

The rate of infantile mortality among legitimate infants was 78, and among illegitimate infants it was 174. In conformity with the usual experience the mortality rates for males were higher than those for females both during the first four weeks and in the subsequent months.

The infantile mortality rate was uneven throughout the various wards; the approximate rates were:—in Knowsley 127, in Derby 116, in Linacre 84, in Stanley 60, in Mersey 56, and in Orrell 43, respectively.

Neo-Natal Mortality.—Thirty-nine children died before they were a week old, and a total of 58, or 46 per cent. of all the deaths under one year, occurred in children under the age of one month. This is a neo-natal mortality rate of 37·4 per 1,000 births. The following table taken in conjunction with the preceding table of infantile mortality shows clearly that the decline of mortality in the first year of life has been much less during the first month. It has previously been well pointed out in this connection that as the proportion of deaths of the

“unfit,” or those born with defective stamina, will obviously be greater in the first than in the last months of the year, the lives saved by modern infant welfare practice are proportionately more numerous among the “fit” than the “unfit.”

DEATH-RATES PER 1,000 BIRTHS OF INFANTS UNDER FOUR WEEKS.

Years.	BOOTLE.	ENGLAND AND WALES.
	Deaths per 1,000 Births.	Deaths per 1,000 Births.
1906—1910	37·0	40
1911—1915	39·2	39
1916—1920	32·3	37
1921—1925	34·2	33
1926—1930	32·7	32
1931—1935	36·9	32
1936	35·5	30·2
1937	28·7	29·7
1938	37·4	

Public Health (Ophthalmia Neonatorum) Regulations, 1926 to 1937.—Eleven cases of ophthalmia neonatorum were notified during the year compared with 9 in 1936 and 11 in 1935; the rates per 1,000 births being 5·5 for 1937, 5·3 for 1936, and 6·7 for 1935. The disposal of the cases and the results are shown in the table below:—

Cases.				Vision Unim- paired.	Vision Im- paired.	Removed from Area	Still under Treat- ment at end of year.	Total Blind- ness.	Deaths.
Brought forward from 1937.	Notified.	Treated.							
		At Home.	In Hospital						
1	11	12	—	11	—	—	—	—	1

Under the Public Health Act, 1936, Sec. 176, conferring powers for the prevention of blindness or for the treatment of persons suffering from disease or injury to the eyes arrangements have been continued with St. Paul's Eye Hospital, Liverpool, for the reception with their mothers of new-born infants suffering from inflammation of the eyes.

Home Visitation of Infants.—There are nine officers on the Health visiting staff, of whom one devotes her time to general clinic supervision and to certain special duties; two give half their time to tuberculosis visiting, and two give one-half of their time to the School

Medical Service; the establishment is, therefore, equivalent to 7 visitors giving their whole time to Maternity and Child Welfare duties. This staff paid 6,952 visits to infants under one year, an average of five to each infant, as compared with 7,789 during 1937.

Infant Welfare Clinics.—During 1938 one toddlers' clinic and eight infant clinic sessions were conducted weekly.

The following tabular statement shows the numbers of new infants presented for examination and advice, together with total yearly and average attendances at each Clinic:—

Clinic,	New Cases.			Attendances.				
	Under one year.	One to three years	Total.	Under one year.	One to three years.	Total.	No. of Sessions	Average attendance at each.
<i>Health Centre—</i>								
Monday afternoon ..	147	44	191	2238	519	2757	48	57·4
Tuesday morning ...	50	31	81	1161	240	1401	51	27·5
Wednesday afternoon	222	85	307	3160	703	3863	52	74·3
Thursday morning ..	93	40	133	1383	558	1941	51	38·0
Thursday afternoon..	211	48	259	3104	495	3599	51	75·7
<i>Balliol Road Centre—</i>								
Tuesday afternoon ...	179	79	258	2844	445	3289	51	64·5
Wednesday morning	86	46	132	1349	386	1735	52	33·4
Thursday afternoon	112	36	148	1769	271	2040	51	40·0
Totals ..	1100	409	1509	17008	3617	20625	407	50·7

Education in mothercraft, which is the prime function of the Infant Welfare Clinics, was continued during the year, and included special talks given by the Health Visitors to groups of mothers at the Clinics held at the Health Centre; these talks formed part of a considered syllabus dealing with the principal points in infant hygiene.

YOUNG CHILD WELFARE.

Young Child Mortality.—The improvement in the health of infants which has been so marked during the last twenty years has to some extent drawn attention from the equal or greater advance in the health of young children over the age of twelve months. The following table, however, shows clearly a large reduction in the mortality of children in their second and subsequent years.

MORTALITY PER 1,000 LIVING IN EACH OF THE FIRST FIVE YEARS OF LIFE.

Year.	Under 1 Year	1—2 Years.	2—3 Years.	3—4 Years.	4—5 Years.	0—5 Years.	1—5 Years.	2—5 Years.
1911	145	57·2	—	—	—	56·0	25·0	14·1
1921	96	38·0	—	—	—	39·6	19·8	11·6
1929	83	42·1	16·3	8·9	1·8	31·0	16·7	8·8
1930	79	24·2	7·4	6·9	3·8	26·3	10·4	6·0
1931-1935	88	23·6	11·6	8·1	5·5	29·2	12·2	8·4
1936	68	19·2	6·7	2·0	3·9	21·5	7·9	4·2
1937	77	8·3	11·8	4·1	4·1	22·7	7·1	6·7
1938	81	10·7	7·1	10·6	2·0	23·2	7·6	6·5
England & Wales 1936	62	10·7	5·0	3·4	3·0	17·0	5·5	3·8

Medical Supervision.—There is an obvious and unfortunate tendency for children to lose touch with the Welfare Centres as they grow older, as is shown by comparing the attendances of four year olds with those of younger children. That this failure has unhappy results for the child is shown by subsequent examination on first entering school, when a large number of remediable but unremedied defects are discovered. It is necessary to call attention to the usual experience that a greater number of defects requiring treatment occur in school entrants than in the later age groups, pointing to lack of care in pre-school life. It is lamentable to have to comment on the numbers of children between two and five years of age who are never brought for an overhaul—too often parents forget that health no less than disease requires supervision, and that prevention is preferable to the most brilliant surgical intervention.

Reference to the table Appendix 16 brings a number of important facts to light. In the first place it shows the marked falling off of visits of toddlers as they grow older; when it is known that in the

age groups of two, three and four years the total examinations were 325, 221, and 43 respectively, whereas the numbers of children in those age groups in the Borough were estimated at 1,442, 1,441, and 1,268, then one appreciates how much there remains to be done to stimulate the public to use the personal health services.

Attention is drawn to the percentage, increasing with age, of children with dental defects, and to the fact that as the children get older more dental treatment becomes necessary, *i.e.*, dental sepsis or toothache is allowed to develop and calls for action, although it may be assumed that many of those children who present evidence of dental decay at say two years may by the age of four have dental abscesses, but often in the absence of toothache no treatment is sought. Striking features are the reluctance with which parents consent to any measure which they think may cause the child temporary pain, despite the fact that general anaesthesia is employed in dental treatment in toddlers, and the difficulty of convincing them of the damage to health which threatens the child when advice is not taken. Out of a total of 43 four year old children, 25 had dental defects which in 19 instances required attention by the dentist, suggesting that the main reason why the child was brought to the clinic was not in order to secure a general medical examination to exclude disease but mostly for the relief of toothache.

It is regrettable to find that the incidence of rickets in some form or another is so common, *viz.*, about 25 per cent. in the two year old group; it indicates defective diet, imperfect hygiene, etc., and it also shows that a child who has previously attended the centre as an infant in its earlier months may develop the condition in the absence of subsequent visits.

The number of children showing signs of subnormal nutrition or anaemia is also considerable—some of these are included in the numbers in the rachitic group—and in this connection, along with children with debility following infectious disease, it is disappointing to have to record the relatively small number of children whose parents consent to convalescent home treatment. Almost invariably the more unsatisfactory the condition of the child and the home circumstances the less ready is the parent to consent to the child's leaving home for convalescence. Frequently disinclination to use convalescent treatment facilities is bound up with false sentiment—reluctance to part with the child even in its own interests—or is due to *laissez faire*, an attitude of mind most impervious to reason and persuasion.

Of eye defects referred for ophthalmic treatment (50 per cent. of the total) most were squints and it is the rule to note a delay in seeking treatment, a matter which militates against complete restoration of vision in the faulty eye. Quite a common reason for inaction is the acceptance of the squint as a hereditary complaint which will "cure itself" given time, or about which nothing can be done.

As has been stated in previous reports, there is a Special Toddlers' Clinic, but toddlers are seen at the infant welfare sessions also, so that extra visits entailing inconvenience to mothers already attending with infants are avoided where possible. In all, 589 children between the ages of two and five years were examined, and 268 were referred to various agencies for treatment.

During the year children under one year of age made 17,008 attendances, and children aged one to five years made 3,617 attendances at the Infant Clinics, and 201 children made 850 attendances at the Toddlers' Clinic.

Supervision by Health Visitors.—During the year the Health Visitors paid 8,666 home visits to children from one to five years, infants in their second year receiving on the average over two visits each, and children between two and five years receiving over one visit each.

Convalescent Home Provision.—The usual provision was made in the Maternity and Child Welfare Sub-Committee's estimates for grants towards the cost of convalescent home treatment for children under the age of five years, because of the fact that child health would be much improved by acceptance of the routine of good food, open air, exercise, and rest, practised in the modern convalescent home. The position in this regard showed further improvement during the year, 24 children under five years of age and 91 children over that age receiving convalescent treatment.

Nurse Children.—The powers in respect of the reception of children under the age of nine years for reward conferred on the Council by the Public Health Act, 1936, are administered through the Health Visitors, who supervised the general health and well-being of 11 such children who were on the register on 31st December last,

Boarded-out Children.—At the end of the year two children only were on the Register of Children boarded-out by the Council under Part VI. of the Public Assistance Order, 1930.

The Liverpool Child Welfare Association. — This Association has continued to send workers one morning each week to the School Medical Offices to facilitate the arrangements for dealing with recommendations of the medical staff of the Council or private doctors for the provision of surgical appliances, cod liver oil, extra nourishment, or convalescent home treatment, to infants and school children.

IX. HEALTH EDUCATION.

Health Education, which is increasingly recognised to be an important function of the health services of the borough, was continued during the year. The Council's medical staff addressed several meetings; in addition, the Health Visitors continued to give health talks three times weekly to mothers in attendance at the clinics, in supplement of the more special instruction on the topic of the moment in the homes.

Advantage continued to be taken of the scheme organised some years ago by the Central Council for Health Education for the regular supply and display of poster designs from the various national organisations having special interests such as maternity and child welfare, tuberculosis, the milk supply, smoke abatement, and venereal diseases.

X. NURSING ARRANGEMENTS, HOSPITALS AND OTHER INSTITUTIONS AVAILABLE FOR THE DISTRICT.

Professional Nursing in the Home. — The services of the Bootle District Nurses' Association are available for the nursing in their own homes of patients suffering from puerperal fever, measles, whooping cough, epidemic diarrhoea, ophthalmia neonatorum, pneumonia, and poliomyelitis; information as to cases requiring such attention is mainly derived from the health visiting staff, and the financial arrangements with the Association provide for payment by the Council of an annual retaining fee of £35, together with a charge of 8d. per visit in approved cases. The classification of such work by the District Nurses' Association follows:—

	Carried over from 1937	New Cases	Total	Total Visits	Transferred for treat- ment to Hospital	Died	Im- proved	Under treatment at end of 1938
Discharging eyes ...	2	73	75	1038	—	—	75	—
Pneumonia	3	50	53	870	1	1	47	4
Tuberculosis	2	3	5	231	2	1	—	2
Worms	1	49	50	334	—	—	50	—
Diarrhoea	—	13	13	114	—	—	13	—
Bronchitis	—	3	3	45	—	—	3	—
Other diseases ...	1	35	36	570	—	—	36	—
	9	226	235	3202	3	2	224	6

Midwives.—Seventeen midwives, excluding those practising in local municipal maternity homes, signified their intention to practise within the district during the year commencing 1st January 1938; eight of these were engaged in the Municipal Midwifery Service.

Hospitals.—The Bootle General Hospital (100 beds) is the only general hospital situate within the Borough boundary, but the Liverpool voluntary hospitals (both general and special) are also attended by Bootle residents.

Other institutional accommodation for the sick is obtained, as explained elsewhere in the Report, by agreement with the Liverpool City Council for reception into their institutions of sick persons, resident in the Borough, for whom other provision is not at the time available.

Clinics and Treatment Centres.—The following is a statement of Clinics and Treatment Centres under the control of the Local Authority:—

1. INFANT CONSULTATIONS.

Health Centre, Knowsley Road—

Monday, 1-45 p.m.

Tuesday, 10-15 a.m.

Wednesday (Toddlers), 10-15 a.m.

Wednesday, 1-45 p.m.

Thursday, 10-15 a.m.; 1-45 p.m.

School Medical Offices, Balliol Road—

Tuesday, 1-45 p.m.

Wednesday, 10-15 a.m.

Thursday, 1-45 p.m.

2. ANTE-NATAL CLINICS.

Health Centre, Knowsley Road—

Tuesday, 1-45 p.m.

Friday, 10-15 a.m.; 1-45 p.m.

School Medical Offices, Balliol Road—

Monday, 10-15 a.m.

3 SCHOOL CLINICS.

Health Centre, Knowsley Road—

Minor Ailments Clinic—Daily, 8-45 to 9-30 a.m.

Dental Clinic—By appointment only.

School Medical Offices, Balliol Road—

Inspection Clinic—Daily, 9 a.m. to 9-30 a.m.

Minor Ailments Clinic—Daily, 8-45 to 9-30 a.m.

Eye Clinic—Monday and Wednesday, 1-30 p.m.

Dental Clinic—By appointment only.

Throat Clinic—By appointment only.

Remedial Exercises Clinic—By appointment only.

Rheumatism Clinic—Wednesday, 2 to 4 p.m.

Orthopaedic Clinic—By appointment only.

Aural Clinic—Friday, 2 to 4 p.m.

4 TUBERCULOSIS DISPENSARY.

Health Centre, Knowsley Road—

Daily (except Thursday), 2 p.m.; Wednesday, 7 p.m.

5. VENEREAL DISEASES CLINIC.

Bootle General Hospital, Derby Road—

Males—Monday, 5 p.m.; Tuesday, Wednesday and Friday, 6 p.m.

Females—Wednesday, 12 noon; Thursday, 5 p.m.

6. OTHER CLINICS AND DAY NURSERIES.

Health Centre, Knowsley Road—

Artificial Light Treatment Clinic—Daily, 10 a.m.

School Medical Offices, Balliol Road—

M. & C. W. Dental Sessions—Tuesday, 1-30 p.m.; Wednesday, 9-30 a.m.; Friday, 1-30 p.m.

Day Nurseries—Nil.

Ambulance Transport—Ambulance provision available for residents in the borough remains as described in the last report.

XI.—HOUSING.

Housing Progress during 1938. — During 1938 fourteen houses were erected under municipal housing schemes, and seventeen were erected by other bodies and persons. The table below demonstrates the progress made with new housing provision during recent years:—

Houses Erected				by Local Authority	by Private Enterprise	by Private Enterprise assisted by Corporation on Corpora- tion land
Number of houses completed during 1920				26	—	—
" " " 1921				76	5	—
" " " 1922				200	—	—
" " " 1923				—	5	—
" " " 1924				2	—	—
" " " 1925				88	3	—
" " " 1926				84	—	—
" " " 1927				172	9	—
" " " 1928				305	—	—
" " " 1929				346	6	—
" " " 1930				348	—	—
" " " 1931				394	—	—
" " " 1932				176	46	11
" " " 1933				79	17	104
" " " 1934				26	44	286
" " " 1935				172	165	184
" " " 1936				139	143	76
" " " 1937				—	25	15
" " " 1938				14	1	16
Totals				2647	469	692

During the year 30 houses were demolished.

Housing Applications in 1938.—New or renewed applications for municipal houses continued to be received, and the table below classifies the 376 applications now on the register from non-householders resident in the Borough.

HOUSING CIRCUMSTANCES OF RESIDENT APPLICANTS FOR MUNICIPAL
HOUSES ON FEBRUARY 18TH, 1939.

	Number living in 1 Room	Number living in 2 Rooms	Number living in 3 Rooms	Number living in 4 Rooms	Number living in 5 Rooms	Totals
Husband & Wife	16	44	3	2	—	65
„ + 1 child	15	99	5	4	—	123
„ + 2 children	14	68	3	2	2	89
„ + 3 „	3	24	3	2	—	32
„ + 4 „	—	13	6	—	1	20
„ + 5 „	—	1	1	3	—	5
„ + 6 „	—	1	—	2	—	3
„ + 7 „	—	1	—	—	—	1
„ + 8 „	—	—	1	1	—	2
Widow or Widower	3	—	—	—	—	3
„ + 1 child	—	3	2	1	—	6
„ + 2 children	1	8	—	1	—	10
„ + 3 „	—	5	1	—	—	6
„ + 4 „	1	3	1	—	—	5
„ + 5 „	—	2	1	—	—	3
„ + 6 „	—	—	—	—	—	—
„ + 7 „	—	—	—	—	—	—
„ + 8 „	—	—	—	—	—	—
Single Person	1	2	—	—	—	3
Totals	54	274	27	18	3	376

Improvement Areas.—The three improvement areas declared at intervals since 1932 received some 400 inspections at regular intervals throughout the year, and the by-laws were found to be observed with certain minor exceptions.

Housing Act, 1936, Sec. 9.—During the year 212 houses were inspected under the above Section, the property being distributed in Wards as follows:—Knowsley Ward 67, Mersey Ward 19, Derby Ward 100, and Linacre Ward 26

In many cases the work carried out has been of an extensive nature and great improvements have been effected.

The progress made in regard to action taken under Section 9 at the end of December 1938 can be summarised as follows:—

Number of houses inspected	...	...	...	...	...	2543
„ „ „ in respect of which informal notices were served	...	...	...	...	...	2543
„ „ „ at which work was completed as a result of informal notices	...	...	...	...	...	2094

Number of houses in respect of which Statutory notices				
			were served	327
„	„	„	at which work was completed as a result of Statutory notices	302
„	„	„	at which work was in progress	61
„	„	„	at which work was not commenced	86

Overcrowding.—It will be recalled that the Housing survey conducted in 1935 showed that there were then 1,020 “houses” (5·3 per cent. of the total 19,112 surveyed) overcrowded, and that 681 “houses” (3·6 per cent. of those surveyed) provided just the minimum accommodation required by the Act; the survey further showed 1,921 “houses” where the number of persons in the family was only half a unit less than the permitted number.

A further survey was conducted at the end of 1937 and showed that there remained 623 "houses" overcrowded, and a similar survey in January 1939 showed that there remained 289 "houses" overcrowded. It should be realised, however, that this figure is a bare minimum, inasmuch as the second survey was necessarily limited to examining the conditions at the time of the 1,020 "houses" recorded as overcrowded on the 1935 survey, and the third survey was limited to the remaining 623. The last re-inspections showed:—

- (a) no change in 289 cases, and an increase of overcrowding due to growth in age or size of the family in 94 cases;
- (b) the overcrowded house vacated, with the family having left for an address unknown in 301 cases; or
- (c) the overcrowded house vacated by removal to a house which was visited and found to be not overcrowded, or by the taking over of additional rooms at the same address in 430 cases, *i.e.*, the overcrowding abated,

and it is not a safe assumption that group (b), numbering 395 cases when the necessary addition is made of cases where overcrowding had been produced by age increase, have, in fact, left the Borough or removed to houses large enough to relieve the overcrowding.

HOUSING STATISTICS.

I. *Inspection of Dwelling-houses during the Year.*

(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	2612
(b) Number of inspections made for the purpose	7281
(2) (a) Number of dwelling-houses (included under subhead (1) above) which were inspected, and recorded under the Housing Consolidated Regulations, 1925 and 1932	212
(b) Number of inspections made for the purpose	2013
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	—
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	2362

II. *Remedy of Defects during the year without Service of formal Notices.*

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	1924
--	------

III. *Action under Statutory Powers during the Year.*

(a) Proceedings under sections 9, 10, & 16 of the Housing Act, 1936—	
(1) Number of dwelling-houses in respect of which notices were served requiring repairs	35
(2) Number of dwelling-houses which were rendered fit after service of formal notices—	
(a) by owners	38
(b) by Local Authority in default of owners	—
(b) Proceedings under Public Health Acts—	
(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	542
(2) Number of dwelling-houses in which the defects were remedied after service of formal notices—	
(a) by owners	513
(b) by Local Authority in default of owners	7
(c) Proceedings under sections 11 and 13 of the Housing Act, 1936—	
(1) Number of dwelling-houses in respect of which Demolition Orders were made	—
(2) Number of dwelling-houses demolished in pursuance of Demolition Orders	—
(d) Proceedings under section 12 of the Housing Act, 1936—	
(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	—
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	—

IV. *Housing Act, 1936—Part IV. Overcrowding—*

(a) (i) Number of dwellings overcrowded at the end of the year	396
(ii) Number of families dwelling therein	396
(b) Number of new cases of overcrowding reported during the year ...	110
(c) Number of cases of overcrowding relieved during the year	125
(d) Particulars of any cases in which dwelling-houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding	Nil
(e) Any other particulars with respect to overcrowding conditions upon which the Medical Officer of Health may consider it desirable to report	—

XII. **BLIND WELFARE.**

The duties of the Council under the Blind Persons Act, 1920, are administered in accordance with a revised scheme and regulations which received the approval of the Minister of Health in April 1934.

Registration.—During the year the Ophthalmic Surgeon held 15 clinics and examined 73 cases; and also examined three cases at home, owing to physical disability which prevented attendance at the clinic. Of this total of 73 examinations 19 were added to the register of blind persons, and there were also six transfer cases added. Twenty-four names were removed, 11 owing to death, and 13 to removal outside the Borough, leaving a total on the register at the end of 1938 of 170 persons as compared with 169 last year.

The age and sex classification of the 170 persons referred to is as follows:—

Age Group.	Males.	Females.	Total.
0—5 years	—	—	—
5—16 „	5	2	7
16—21 „	1	1	2
21—30 „	10	4	14
30—40 „	7	5	12
40—50 „	14	11	25
50—60 „	6	14	20
60—70 „	18	24	42
Over 70 years	11	37	48
Total	72	98	170

The number of persons on the register in January 1926 was 81, and comparison of the age classification then and now shows that the increase is almost entirely at ages over 40—thus, the numbers at ages 40-50 were 4 as against 25 in 1938; at years 50-60 they were 8 and 20; at ages 60-70 they were 14 and 42; and over 70 years 21 and 48 respectively.

Employment and Instruction. — The registered blind are assisted and supervised by a Home Teacher giving the whole of her time to work in the Borough; during the year the Home Teacher paid 1,195 visits, gave 738 lessons at home, and disbursed the weekly money payments to necessitous cases. In addition classes were established in the autumn in knitting and weaving for women, and in basket-making for men; the classes are well attended and are much appreciated.

The Home Teaching Society on December 31st 1938 was assisting 136 unemployable blind with money grants at a total weekly cost of £93 16s. 9d., the amount of relief being given varying from 5/- to 25/- weekly, with the maximum amount of 25/- being paid in 8 cases. In addition ten persons (9 males and one female) are employed at the Blind Workshops.

During the year 20 applications for the certification of blindness in order to take advantage of the Wireless Telegraphy (Blind Persons Facilities) Act, 1926, were granted.

Domiciliary Medical Attendance.—In May 1937 the Council instituted a Domiciliary Medical Service for the (non-insured) registered blind by arrangement with local medical practitioners who agreed to enter their names on a panel and to provide medical attendance for a capitation fee of the same amount as that obtaining under the National Health Insurance Acts; necessary prescriptions are dispensed by a similar panel of private chemists. The scheme works smoothly and satisfactorily, and the cost to the Council for the financial year 1939-40 is estimated to be £60.

Prevention of Blindness. — Under the scheme adopted in December 1937 for the Prevention of Blindness eight cases were notified of persons threatened with blindness, of whom five were found to be blind within the meaning of the Blind Persons Act. The other cases were assisted with a prescription and provision of spectacles.

VITAL STATISTICS OF WHOLE DISTRICT DURING 1938 AND PREVIOUS YEARS.

69

YEAR.	Population estimated to middle of each year.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS		NETT DEATHS BELONGING TO THE DISTRICT			
		Un-corrected Number	Nett.		Number.	Rate.*	of Non-residents registered in the District. 8	of Residents not registered in the District. 9	UNDER		AT ALL AGES.	
			Number. 4	Rate. 5					ONE YEAR OF AGE	Rate per 1,000 Nett Births	Number.	Rate
1	2	3	4	5	6	7	8	9	10	11	12	13
1914.	73,230	2,279	2,321	31.7	1,033	14.1	54	263	286	123	1,242	17.0
1915.	Civil 71,617 Total 74,285	2,023	2,050	27.6	1,054	14.7	62	294	292	112	1,286	17.9
1916.	Civil 71,135 Total 77,396	2,047	2,076	26.8	1,101	15.5	80	258	227	109	1,279	18.0
1917.	Civil 68,871 Total 76,772	1,853	1,873	24.4	1,023	14.1	91	281	187	99	1,213	17.6
1918.	Civil 73,500 Total 80,500	1,781	1,810	22.5	1,224	16.6	63	268	210	116	1,429	19.4
1919.	Civil 77,000 Total 80,500	1,860	1,914	23.9	988	12.7	79	245	184	96	1,154	15.0
1920.	80,029	2,285	2,289	28.6	1,000	12.5	59	195	223	97	1,136	14.2
1921.	76,487	2,142	2,068	27.0	817	10.7	43	236	198	96	1,010	13.2
1922.	76,518	2,144	2,051	26.8	877	11.5	42	253	164	80	1,093	14.3
1923.	76,549	2,159	1,999	26.1	858	11.2	50	262	170	85	1,070	14.6
1924.	76,581	2,078	1,942	25.4	799	10.4	59	226	192	99	966	12.6
1925.	76,612	2,077	1,943	25.4	820	10.7	53	324	188	97	1,091	14.2
1926.	76,643	1,953	1,865	24.3	730	9.5	36	311	187	100	1,005	13.1
1927.	76,674	1,916	1,817	23.7	734	9.6	39	339	141	78	1,034	13.5
1928.	76,705	1,793	1,746	22.8	703	9.2	48	379	186	107	1,033	13.5
1929.	76,737	1,668	1,660	21.6	713	9.3	34	414	138	83	1,093	14.2
1930.	76,768	1,774	1,793	23.4	608	7.9	61	394	141	79	941	12.3
1931.	77,160	1,709	1,667	21.6	731	9.5	55	464	159	95	1,140	14.8
1932.	77,260	1,711	1,768	22.9	638	8.3	48	437	152	86	1,027	13.3
1933.	77,210	1,532	1,652	21.4	618	8.4	56	483	146	88	1,075	13.9
1934.	76,800	1,541	1,644	21.4	587	7.6	45	448	126	77	990	12.9
1935.	76,500	1,491	1,636	21.4	568	7.4	46	458	150	92	980	12.8
1936.	76,010	1,318	1,688	22.2	579	7.6	51	509	115	68	1,037	12.6
1937.	74,690	1,142	1,640	22.0	482	6.5	64	535	127	77	953	12.8
1938.	74,080	1,072	1,550	20.1	622	8.4	119	457	126	81	960	13.0

* These rates are based on the uncorrected numbers.

Area of District in acres (exclusive of river bed)—1,946.5.

APPENDIX 2.

CASES OF INFECTIOUS DISEASES NOTIFIED DURING THE YEAR 1938.

NOTIFIABLE DISEASES.	NUMBER OF CASES NOTIFIED.											Total Cases Notified in each Locality (e.g., Parish or Ward) of the District.						
	At all Ages.	At Ages—Years.										Derby Ward.	Stanley Ward.	Mersey Ward.	Knowsley Ward.	Linacre Ward.	Orrell Ward.	
		Under One year	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45							45-65	Over 65 yrs.
Smallpox .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Cholera-Plague .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diphtheria (including Mem- branousCroup)	270	2	13	20	16	19	113	45	29	13	7	19	37	22	58	63	39	51
Erysipelas	61	..	4	3	..	1	..	3	4	9	..	..	12	7	11	8	7	16
Scarlet Fever	338	..	12	16	26	32	156	62	15	17	1	1	40	67	36	60	50	85
Typhus Fever .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..
Enteric Fever	1	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..
Relapsing Fever .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Continued Fever .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..
Puerperal Pyrexia	2	..	..	..	..	..	..	..	1	2	..	..	..	1	1	1	1	1
Cerebro-spinal Meningitis ..	6	..	..	1	1	..	1	1	1	1	..	..	..	1	1	2	1	1
Poliomyelitis	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..
Ophthalmia Neonatorum ..	11	11	..	..	..	..	..	..	..	..	..	..	3	1	1	1	3	2
• Infantile Diarrhoea	8	4	4	..	..	..	..	..	..	..	..	..	3	..	..	2	..	3
Influenzal Pneumonia	10	..	1	1	..	1	..	1	..	4	1	..	1	..	1	1	2	5
Acute Primary Pneumonia ..	124	25	18	11	12	5	14	8	4	7	6	7	23	7	12	19	14	49
Trench Fever .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Malaria .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Encephalitis Lethargica ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Dysentery .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals	832	42	53	52	55	58	284	120	54	53	15	27	119	106	120	157	118	212

* Voluntary notification of cases under the age of two years during July, August and September.
Isolation Hospital or Hospitals, Sanatoria, etc.:—Corporation Hospital, Linacre Lane, Bootle; Bootle Sanatorium, Maghull.

CAUSES OF DEATH.	NET DEATHS AT THE SUBJOINED AGES OF "RESIDENTS" WHETHER OCCURRING WITHIN OR WITHOUT THE DISTRICT.										TOTAL DEATHS WHETHER OF "RESIDENTS" OR "NON-RESIDENTS IN INSTITUTIONS IN THE DISTRICT
	All ages.	Under 1 year.	1 and under 2 years.	2 and under 5 years.	5 and under 15 years.	15 & under 25 years.	25 & under 45 years.	45 & under 65 years.	65 and upward.		
All causes { Certified	929	120	16	29	30	42	91	231	370	109	
{ Uncertified	31	6	1	9	15	10	
Enteric Fever	
Small-pox	
Measles	20	5	7	8	
Scarlet Fever	1	1	2	
Whooping Cough	7	1	5	1	
Diphtheria and Croup	17	1	..	6	8	1	1	15	
Influenza	2	2	..	
Erysipelas	1	1	
Phthisis (Pulmonary Tuberculosis)	70	2	19	32	17	..	12	
Tuberculous Meningitis	5	1	..	1	2	1	1	
Other Tuberculous Diseases	3	1	..	1	..	1	
Cancer, malignant disease	141	2	13	64	62	15	
Rheumatic Fever	3	2	..	1	
Meningitis	4	1	..	1	1	1	..	2	
Organic Heart Disease	165	1	4	14	35	111	3	
Bronchitis	42	7	..	1	1	12	21	..	
Pneumonia (all forms)	97	24	2	4	5	1	5	17	39	9	
Other diseases of respiratory organs	9	6	3	..	
Diarrhoea and Enteritis	7	6	..	1	2	
Appendicitis and Typhlitis	1	1	
Cirrhosis of Liver	3	1	1	1	..	
Alcoholism	
Nephritis and Bright's Disease	31	1	1	1	2	13	13	2	
Puerperal Fever	
Other accidents and diseases of Preg- nancy and Parturition... ..	1	1	
Congenital Debility and Malformation, including Premature Birth	41	44	4	
Violent Deaths, excluding Suicide	26	1	..	2	3	6	5	6	3	21	
Suicide	3	1	..	2	..	1	
Other Defined Diseases	253	33	1	2	5	4	17	63	128	29	
Diseases ill-defined or unknown... ..	4	2	2	1	
Totals	960	126	16	29	30	42	92	240	385	119	

[illegible]

1938 Nett Deaths from stated causes at various Ages under One Year of Age.

CAUSES OF DEATH.											Total Deaths under One Year.	
All Causes	(Certified)	(Uncertified)	Under 1 week	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 4 weeks.	4 weeks and under	3 months and under	6 months and under	9 months and under	12 months.
Small-pox	38	2	4	6	56	19	16	12	18	121
Chicken-pox	1	—	—	1	2	1	1	—	1	5
Measles	—	—	—	—	—	—	1	—	4	—
Scarlet Fever	—	—	—	—	—	—	1	—	—	1
Whooping Cough	—	—	—	—	—	—	1	—	—	1
Diphtheria and Croup	—	—	—	—	—	—	1	—	—	1
Erysipelas	—	—	—	—	—	—	—	—	—	1
Tuberculous Meningitis	—	—	—	—	—	—	—	—	1	1
Abdominal Tuberculosis	—	—	—	—	—	—	—	—	1	1
Other Tuberculous Diseases	—	—	—	—	—	—	—	—	1	1
Meningitis (<i>not Tuberculous</i>)	—	—	—	—	—	—	—	—	1	1
Convulsions	3	3	—	2	8	2	1	1	1	13
Laryngitis	—	1	—	—	1	2	2	5	9	7
Bronchitis	—	1	—	—	1	4	5	—	—	24
Pneumonia (all forms)	—	—	—	—	1	3	1	—	—	1
Diarrhoea	—	—	—	1	1	—	1	—	—	5
Enteritis	—	—	—	—	—	—	—	—	—	—
Gastritis	—	—	—	—	—	—	—	—	—	—
Syphilis	—	—	—	—	—	—	—	—	—	—
Rickets	—	—	—	—	—	—	—	—	—	—
Suffocation, overlying	—	—	—	—	—	—	—	—	—	—
Injury at Birth	1	—	—	1	2	1	—	—	—	3
Atelectasis	2	1	—	—	3	1	1	—	—	5
Congenital Malformations	—	—	—	—	—	3	—	—	—	33
Premature Birth	23	2	3	2	30	3	—	—	—	6
Atrophy, Debility and Marasmus	1	—	1	1	2	3	1	—	—	19
Other Causes	9	—	—	—	10	1	2	3	3	—
Totals			39	8	4	7	58	20	17	12	19	126

Nett Births in the year

{ legitimate infants ...1,504

{ illegitimate infants... 46

Nett Deaths in the year

{ legitimate ... 118

{ illegitimate... 8

APPENDIX 5.

Memo. 87/T. (Revised).
FIRST SCHEDULE.

Form T. 145.

TREATMENT OF TUBERCULOSIS.

RETURN FOR THE YEAR 1938.

(A) Return showing the work of the Dispensary (or Dispensaries).

DIAGNOSIS.	PULMONARY.				NON-PULMONARY.				TOTAL.				GRAND TOTAL	
	Adults		Children		Adults		Children		Adults		Children			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
A.—NEW CASES examined during the year (excluding contacts):—														
(a) Definitely tuberculous.	31	33	1	3	5	5	5	14	36	38	6	17	97	
(b) Diagnosis not completed	—	—	—	—	—	—	—	—	1	6	5	4	16	
(c) Non-tuberculous	—	—	—	—	—	—	—	—	51	59	26	24	159	
B.—CONTACTS examined during the year:—														
(a) Definitely tuberculous.	1	—	—	—	—	—	—	1	1	—	—	1	2	
(b) Diagnosis not completed	—	—	—	—	—	—	—	—	1	3	2	8	14	
(c) Non-tuberculous	—	—	—	—	—	—	—	—	19	33	42	41	135	
C.—CASES written off the Dispensary Register as:—														
(a) Recovered	2	2	—	3	1	1	5	6	3	3	5	9	20	
(b) Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous)	—	—	—	—	—	—	—	—	75	103	77	76	331	
D.—NUMBER OF CASES ON Dispensary Register on December 31st:—														
(a) Definitely tuberculous.	197	133	11	16	23	30	50	53	220	163	61	60	513	
(b) Diagnosis not completed	—	—	—	—	—	—	—	—	1	7	5	8	21	

1. Number of cases on Dispensary Register on January 1st	558	7. Number of consultations with medical practitioners:—	
		(a) Personal	11
		(b) Other	243
2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years	14	8. Number of visits by Tuberculosis Officers to homes (including personal Consultations)	19
3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of"	62	9. Number of visits by Nurses or Health Visitors to homes for Dispensary purposes	1869
4. Cases written off during the year as Dead (all causes)	48	10. Number of:—	
		(a) Specimens of sputum, etc., examined	534
		(b) X-ray examinations made in connection with Dispensary work	703
5. Number of attendances at the Dispensary (including Contacts)	3029	11. Number of "Recovered" cases restored to Dispensary Register, and included in A (a) and A (b) above	7
6. Number of Insured Persons under Domiciliary Treatment on the 31st December	148	12. Number of "T.B. plus" cases on Dispensary Register on December 31st	222

(B) Number of Dispensaries for the treatment of Tuberculosis (excluding centres used only for special forms of treatment).

Provided by the Council ... One Provided by Voluntary Bodies ... Nil

APPENDIX 5 (continued).

(C) Number of beds available for the treatment of Tuberculosis on the 31st December in Institutions belonging to the Council.

Name of Institution	For Pulmonary Cases		For Non-Pulmonary Cases		Total
	Adults	Children under 15	Adults	Children under 15	
Linacre Hospital	28	..	...	...	28
Maghull Sanatorium	22	...	...	...	22

(D) Return showing the extent of Residential Treatment and Observation during the year in Institutions (other than Poor Law Institutions) approved for the treatment of Tuberculosis.

		In Institutions on Jan. 1st	Admitted during the year.	Discharged during the year.	Died in the Institutions.	In Institutions on Dec. 31st
Number of doubtfully tuberculous cases admitted for observation	Adult males	—	—	—	—	—
	Adult females	1	1	2	—	—
	Children	—	—	—	—	—
	Total	1	1	2	—	—
Number of patients suffering from pulmonary tuberculosis.	Adult males	18	32	26	5	19
	Adult females	10	46	27	6	23
	Children	3	—	2	1	—
	Total .	31	78	55	12	42
Number of patients suffering from non-pulmonary tuberculosis.	Adult males	—	4	4	—	—
	Adult females	—	3	3	—	—
	Children	13	6	10	—	9
	Total	13	13	17	—	9
GRAND TOTAL		45	92	74	12	51

		In Insti- tutions on Jan. 1.	Admit- ted dur- ing the year.	Dis- charged during the year	Died in the Institu- tions.	In Institu- tions on Dec. 31.
Number of patients suffering from pulmonary tuberculosis.	Adult males	8	37	23	12	10
	Adult females	3	22	19	4	2
	Children	5	4	4	1	4
	Total	16	63	46	17	16
Number of patients suffering from non-pul- monary tuberculosis.	Adult males	—	16	11	—	5
	Adult females	3	13	10	3	3
	Children	11	14	9	5	11
	Total	14	43	30	8	19
GRAND TOTAL		30	106	76	25	35

Diagnosis on discharge from observation	For Pulmonary Tuberculosis						For Non-Pulmonary Tuberculosis						Totals		
	Stay under 4 weeks			Stay over 4 weeks			Stay under 4 weeks			Stay over 4 weeks					
	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.
Tuberculous...	1	...	...	...	...	...	.	..	...	1	..
Non-Tuberculous	...	1	...	...	...	...	...	...	...	...	...	...	...	1	...
Doubtful
Totals	1	...	...	1	..	...	...	...	...	...	...	.	2	...

(G) Return showing the immediate results of treatment of definitely tuberculous patients discharged during the year from Institutions (other than Poor Law Institutions) approved for the treatment of Tuberculosis.

Classification on admission to the Institution.	Condition at time of Discharge.	Duration of Residential Treatment in the Institution.										Grand Totals.		
		Under 3 months (but over 28 days)		3-6 months.		6-12 months.		More than 12 months.		Totals.				
		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		Ch.	
PULMONARY TUBERCULOSIS.	Quiescent ...	—	—	—	1	—	—	1	—	—	—	2	—	2
	Not Quiescent ...	1	—	—	3	—	—	1	—	—	1	2	3	6
	Died in Institution ...	—	—	—	—	—	—	—	—	—	—	—	—	—
	Quiescent ...	—	—	—	—	—	—	—	—	—	—	—	—	—
	Not Quiescent ...	—	1	1	2	—	—	1	—	—	2	—	5	7
	Died in Institution ...	—	—	—	—	—	—	—	—	—	1	—	1	1
	Quiescent ...	—	—	—	—	—	—	—	—	—	—	—	—	—
	Not Quiescent ...	4	2	4	4	—	—	3	2	—	1	13	8	22
	Died in Institution ...	—	—	—	—	—	—	—	—	—	1	—	—	1
	Quiescent ...	—	—	—	—	—	—	—	—	—	—	—	—	—
	Not Quiescent ...	—	3	—	—	—	—	—	2	—	—	4	5	9
	Died in Institution ...	2	2	—	1	1	—	1	—	—	—	4	3	8
Totals (Pulmonary) ...		7	8	—	8	11	—	6	6	5	3	26	28	57

[illegible]

APPENDIX 6.

TUBERCULOSIS SCHEME.—

Supplementary Annual Return showing in summary form (a) the conditions and (b) the reasons for the removal of all cases written off the Register, first entered on the Dispensary Register as definite cases of

(a) Remaining on Dispensary Register on 31st December.										(b) Not now on Dispensary Register and reasons for removal therefrom.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																												
Condition at the time of the last record made during the year to the return relates.					Disease not Arrested.					Disease Arrested.					Discharged as Recovered.					Lost sight of or otherwise removed from Dispensary Register.					Dead.					Totals written off Dispensary Register.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
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Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.					Group 3.					Group 1.					Group 2.				

PULMONARY TUBERCULOSIS.

at the end of 1938 of all patients remaining on the Dispensary Register;
The Table is arranged according to the years in which the patients were
pulmonary tuberculosis, and their classification at that time.

1933.					1934.					1935.					1936.					1937.					1938.				
Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus								
	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus)		Group 1.	Group 2.	Group 3.	Total (Class T.B. plus)		Group 1.	Group 2.	Group 3.	Total (Class T.B. plus)		Group 1.	Group 2.	Group 3.	Total (Class T.B. plus)		Group 1.	Group 2.	Group 3.	Total (Class T.B. plus)					
1	-	3	-	3	1	2	4	-	6	-	1	1	-	2	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3	2	-	-	2	4	-	1	-	1	-	1	-	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	2	3	2	7	4	-	2	3	5	2	-	11	4	15	9	1	7	5	13	10	1	11	2	14	7	1	19	3	23
-	2	-	-	2	2	1	6	-	7	5	2	5	-	7	3	1	1	-	2	5	3	9	2	14	9	3	16	6	25
1	-	1	-	1	-	-	-	-	-	2	1	1	-	2	3	-	-	-	-	3	-	1	-	1	5	-	-	1	1
1	-	1	-	1	2	1	-	-	1	-	1	-	1	2	6	-	1	-	1	1	-	1	-	1	-	-	-	-	-
6	6	8	2	16	13	4	13	3	20	9	7	18	5	30	26	2	9	5	16	19	4	22	4	30	21	4	35	10	49
1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
14	7	11	3	21	12	4	15	2	21	5	3	5	3	11	9	2	9	2	13	2	-	4	3	7	-	1	-	-	1
8	-	7	14	21	3	-	13	15	28	3	1	12	19	32	4	1	1	5	7	7	-	-	7	7	-	-	-	7	7
4	-	6	5	11	7	1	10	4	15	-	-	8	13	21	4	1	2	7	10	5	1	-	6	7	1	-	-	5	5
1	-	1	1	2	-	1	1	1	3	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-	-	-	-	-
29	7	25	23	55	22	6	39	22	67	8	4	25	35	64	17	4	12	15	31	14	1	4	16	21	1	1	-	12	13
35	13	33	25	71	35	10	52	25	87	17	11	43	40	94	43	6	21	20	47	33	5	26	20	51	22	5	35	22	62

TUBERCULOSIS SCHEME.—

Supplementary Annual Return showing in summary form (a) the condition
(b) the reasons for the removal of

Condition at the time of the last record made during the year to the return relates.	Previous to 1928					1928.				1929.				1930.				1931.				1932.			
	Bones and Joints.		Abdominal.	Other Organs.	Peripheral Glands.	Total.	Bones and Joints.		Abdominal.	Other Organs.	Peripheral Glands.	Total.	Bones and Joints.		Abdominal.	Other Organs.	Peripheral Glands.	Total.	Bones and Joints.		Abdominal.	Other Organs.	Peripheral Glands.	Total.	
	Adults	M.	F.	Adults	M.	F.	Adults	M.	F.	Adults	M.	F.	Adults	M.	F.	Adults	M.	F.	Adults	M.	F.	Adults	M.	F.	
(a) Remaining on Dispensary Register on 31st December.	Disease Arrested.		Disease not Arrested.		Condition not ascertained during the year		Total on Dispensary Register-at 31st Dec.																		
	C'dren	3	-	1	1	5	-	-	-	-	-	-	1	-	-	-	-	1	-	-	-	1	2		
	Adults	-	-	-	1	1	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-		
	M.	-	-	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	F.	-	-	-	1	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	C'dren	2	-	-	-	2	-	-	1	-	-	1	-	1	-	-	-	1	-	-	-	-	-		
	Adults	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	M.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	F.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	C'dren	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	Adults	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	M.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	F.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	C'dren	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	Adults	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	M.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	F.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	C'dren	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	Adults	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	M.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
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	C'dren	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	Adults	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	M.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
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	C'dren	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	Adults	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	M.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	F.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	C'dren	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	Adults	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	M.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	F.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	C'dren	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	Adults	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	M.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	F.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	C'dren	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	Adults	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	M.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	F.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	C'dren	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	Adults	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	M.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	F.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	C'dren	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	Adults	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	M.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	F.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	C'dren	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	Adults	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	M.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	F.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	C'dren	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	Adults	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-</			

ION-PULMONARY TUBERCULOSIS.

t the end of 1938 of all patients remaining on the Dispensary Register; and
 ll cases written off the Register.

1933.					1934.					1935.					1936.					1937.					1938.				
Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total.
-	-	-	-	-	1	-	-	1	2	-	-	-	-	-	1	-	1	1	3	-	-	-	1	1	-	-	-	-	-
1	-	-	-	1	1	-	-	-	1	-	1	-	1	2	-	-	-	1	1	1	1	-	-	2	3	-	-	1	1
6	1	-	2	8	1	-	-	6	7	2	-	-	6	8	-	-	-	8	8	-	-	-	15	15	1	2	-	10	13
-	-	-	-	-	1	-	-	-	1	1	-	1	-	2	1	-	-	-	1	1	-	1	-	2	1	2	2	-	5
-	1	-	-	1	-	-	1	-	1	1	1	-	-	2	2	-	-	-	2	-	-	-	2	2	-	-	1	3	4
2	-	-	-	2	3	1	-	-	4	-	-	-	1	1	1	-	-	2	3	2	1	-	5	8	2	3	-	7	12
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	2	-	-	1	3	1	-	-	-	1	-	-	1	2	3	-	-	-	1	1	-	-	-	-	-
8	2	-	2	12	9	1	1	8	19	5	2	1	8	16	5	-	2	14	21	4	1	1	26	32	4	7	3	21	35
-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2	1	-	1	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1	-	-	-	1	-	-	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	1	1	8	10	-	-	-	12	12	-	1	-	2	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3	1	1	14	19	2	1	-	4	7	1	1	-	2	4	1	-	-	3	4	-	-	-	1	1	-	-	-	1	1
1	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	1	1	-	2	-	-	1	-	1	-	-	-	-	-	1	1	-	-	2	-	-	-	1	1	-	-	-	-	-
-	-	-	-	-	1	1	1	-	3	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
7	4	3	23	37	3	2	2	17	24	1	2	-	4	7	2	1	-	3	6	-	-	1	2	3	-	-	-	1	1
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
5	6	3	25	49	12	3	3	25	43	6	4	1	12	23	7	1	2	17	27	4	1	2	28	35	4	7	3	22	36

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1930.

PART I.—Summary of Notifications during the period from the 1st January 1938, to the 31st December 1938, in the area of the County Borough of Bootle.

AGE-PERIODS	Fornal Notifications											
	Number of Primary Notifications of new cases of Tuberculosis.											
	0 to 1	1 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 and upwards	Total (all ages)
Pulmonary, Males	1	2	2	7	10	11	7	7	1	48
" Females	2	1	1	13	14	10	6	2	4	..	53
Non-pulmonary, Males	..	4	9	..	1	3	1	2	..	..	..	20
" Females	3	6	7	1	8	4	1	..	..	..	30
												65
												75
												25
												36

SUPPLEMENTAL RETURN.

PART II.—New cases of Tuberculosis coming to the knowledge of the Medical Officer of Health during the above-mentioned period, otherwise than by fornal notification.

AGE PERIODS	0 to 1	1 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 and upwards	Total Cases
Pulmonary Males	1	..	..	..	3	3	4	2	..	13
" Females	1	1	1	..	6	2	..	1	..	13
Non-pulmonary Males	..	1	..	1	..	..	..	..	..	..	..	4
" Females	1	..	..	1	..	..	..	3

APPENDIX 7 (continued).

The source or sources from which information as to the above-mentioned cases was obtained is stated below:—

SOURCE OF INFORMATION.	No. of Cases.	
	Pulmonary.	Non-Pulmonary.
Death Returns—From Local Registrars ...	5	...
" " Transferable Deaths from Registrar-General...	2	1
Posthumous notifications ...	3	2
"Transfers" from other areas (other than transferable deaths)	16	4
Other sources, if any. ...	...	...

PART III.
NOTIFICATION REGISTER.

Number of cases of Tuberculosis remaining at the 31st December 1938, on the Registers of Notifications kept by the Medical Officer of Health of the County Borough	Pulmonary.			Non-Pulmonary.			Total Cases
	Males	Females	Total	Males	Females	Total	
	275	235	510	119	146	265	775
Number of cases removed from the Registers during the year by reason of—							
1. Withdrawal of notification
2. Recovery from the disease
3. Death (all causes)
4. Otherwise

APPENDIX 8.

SUMMARY OF WORK DONE BY SANITARY INSPECTORS.

NUISANCES—

No. of complaints	... ..	1716
No. of complaints confirmed	... ..	1678
No. of nuisances discovered on above complaints	... ..	3590
No. of nuisances discovered excluding on complaint	... ..	1678
No. of re-inspections of nuisances	... ..	13160
No. of special visits and miscellaneous visits	... ..	1418
No. of informal notices served	... ..	2010
No. of statutory notices served	... ..	580
Matters referred to the Borough Engineer	... ..	442
Matters referred to the Water Engineer, Liverpool	... ..	73
Matters referred to the Housing Manager	... ..	49
No. of drains tested	... ..	51
No. of drains re-constructed	... ..	37
No. of drains repaired	... ..	91
No. of drains cleared	... ..	169
No. of ventilating shafts provided or repaired	... ..	12
No. of new gullies fixed	... ..	23
No. of new sinks and wastes provided	... ..	45
No. of water closets repaired	... ..	315
No. of water closet basins renewed	... ..	44
No. of lavatory basins and waste pipes renewed	... ..	12
No. of waste pipes to lavatory basins, sinks and baths repaired	... ..	61
No. of roofs repaired	... ..	839
No. of eaves gutters repaired or renewed	... ..	132
No. of downspouts repaired or renewed	... ..	78
No. of yard surfaces repaired or repaved	... ..	197
No. of dustbins renewed	... ..	271
No. of cases of dampness remedied	... ..	124
No. of general repairs to houses	... ..	1647
Dirty conditions	... ..	22
Removal of fowl and other animals	... ..	3
Accumulations	.. .	10
Miscellaneous	... ..	3

PLACES OF PUBLIC ENTERTAINMENT—

There are 6 buildings used for public entertainment in the town. There were 92 visits of inspection.

HOUSING ACTS—

Howe Street Improvement Area—Re-inspections	...	...	...	...	144
Miller's Bridge Improvement Area No. 1—Re-inspections	...	...	...	...	200
Miller's Bridge Improvement Area No. 2	„	...	...	...	52
Housing Act, 1936, Section 9—					
Number of houses inspected	...	...	...	...	212
Informal notices served	...	...	...	...	212
Informal notices complied with	...	...	...	...	308
Number of houses where work is in progress at end of year	...	...	...	...	61
Statutory notices served	...	...	...	...	35
Statutory notices complied with	...	...	...	...	38
Number of inspections and re-inspections made	...	...	...	...	2013

COMMON LODGING HOUSES—

No. registered under the Public Health Act, 1875	...	...	...	...	4
No. of inspections	...	...	...	...	208
No. of informations laid in respect of infringements	...	...	...	...	—

CANAL BOATS—

No. of inspections and re-inspections of canal boats	...	...	...	...	88
„ notices sent	...	...	...	...	—
„ defects or infringements where necessary work was done without service of notice	...	...	...	...	1

STEPS TAKEN TO PREVENT NUISANCE FROM SMOKE—

No. of observations made	...	...	...	...	...	...	...	...	73
„ intimations sent	...	...	...	...	...	...	...	...	9
„ notices served in respect of excessive black smoke	...	...	...	...	...	...	...	...	—
„ informations laid	...	...	...	...	...	...	...	...	—
Amount of fines and costs	...	...	...	...	...	...	...	...	—

DAIRIES, COWSHEDS, AND MILKSHOPS—

No. of cowkeepers and dairymen resident in the borough on register	...	...	...	...	...	...	...	...	14
„ milk purveyors (not cowkeepers) resident in the borough on register	...	...	...	...	...	...	...	...	42
„ milk purveyors resident outside the borough on register	...	...	...	...	...	...	...	...	24
„ premises registered as cowsheds or dairies or milkshops	...	...	...	...	...	...	...	...	56
„ registered retail purveyors of bottled milk only	...	...	...	...	...	...	...	...	85
„ inspections made—cowsheds 115, dairies and milkshops 413	...	...	...	...	...	...	...	...	528

PICGERIES—

No. of premises	...	...	...	...	...	...	...	...	4
„ visits	...	...	...	...	...	...	...	...	52

STABLES—

No. of visits	60
---------------	-----	-----	-----	-----	-----	-----	-----	-----	----

RATS AND MICE (DESTRUCTION) ACT—

No. of visits re infestation	101
------------------------------	-----	-----	-----	-----	-----	-----	-----	-----	-----

FOOD INSPECTION—

No. of visits to butchers' shops	...	...	...	...	...	...	...	...	842
„ „ fishmongers' shops	...	...	...	...	...	...	...	...	109
„ „ fried fish shops	...	...	...	...	...	...	...	...	112
„ „ dining rooms and kitchens	...	...	...	...	...	...	...	...	44
„ „ grocers' shops	...	...	...	...	...	...	...	...	141
„ „ fruiterers' shops	...	...	...	...	...	...	...	...	139
„ „ cold stores	...	...	...	...	...	...	...	...	28
„ „ ice cream premises	...	...	...	...	...	...	...	...	81
„ „ respecting observation of Merchandise Marks Acts	...	...	...	...	...	...	...	...	469

SUMMARY OF LEGAL PROCEEDINGS—

Food and Drugs (Adulteration) Act, 1928, Sec. 2	...	...	...	...	...	...	...	...	2
Public Health Act, 1936, Sec. 92	...	...	...	...	...	...	...	...	3

DISINFECTION: INFECTIOUS DISEASES—

No. of houses disinfected after notifiable infectious diseases	...	...	...	...	...	...	...	...	538
„ „ „ pulmonary tuberculosis	...	...	...	...	...	...	...	...	96
„ „ „ other diseases	...	...	...	...	...	...	...	...	51
„ „ cleaned in default of, or at request of, owners	...	...	...	...	...	...	...	...	10

All houses assessed at £15 per annum or less are cleaned after infectious diseases (i.e., the walls stripped and the ceilings whitened) by the Corporation at their own cost; in cases of pulmonary tuberculosis the Corporation strip, when necessary, whatever the rent.

LIST OF ARTICLES DISINFECTED—

Paillasses	...	...	...	...	...	...	...	...	254
Mattresses	...	...	...	...	...	...	...	...	11
Beds	...	...	...	...	...	...	...	...	186
Bolsters and Pillows	...	...	...	...	...	...	...	...	1127
Blankets	...	...	...	...	...	...	...	...	1020
Quilts	...	...	...	...	...	...	...	...	506
Sheets	...	...	...	...	...	...	...	...	620
Carpets	...	...	...	...	...	...	...	...	3
Hearthrugs	...	...	...	...	...	...	...	...	1
Wearing Apparel	...	...	...	...	...	...	...	...	640
Miscellaneous Articles	...	...	...	...	...	...	...	...	356
									<hr/> 4724

The figures in the table do not include the ambulance bedding (one bed, one pillow and three blankets), which is disinfected after the removal of each case.

One hundred and seventy-nine books were disinfected.

Forty articles were destroyed at the request of the owners.

BUG INFESTATION—

Number of houses fumigated (Corporation 90, Private 25) ...	...	...	115
Number of vanloads of furniture treated with hydrogen-cyanide ...	...	...	162

FACTORIES ACT, 1937.

FACTORIES—

No. on register	... ..	281
No. of visits and re-visits	... ..	437-
No. of written notices	... ..	4

No. OF DEFECTS—

							Found.	Remedied.
Want of cleanliness	...	...	...	...	...	...	23	22
Overcrowding	...	...	...	...	...	...	—	—
Unreasonable temperature	...	...	...	...	...	...	—	—
Inadequate ventilation	...	...	...	...	...	...	1	1
Defective drainage of floors	...	...	...	...	...	...	—	—
Sanitary conveniences—								
Insufficient	...	...	...	...	...	...	—	—
Unsuitable or defective	...	...	...	...	...	...	1	1
Not separate for sexes	...	...	...	...	...	...	1	1
Other offences	...	...	...	...	...	...	5	6

BAKEHOUSES—

No. on register	... ..	20
No. of visits and re-visits	... ..	79
,, bakehouses found dirty (walls, ceilings and floors)	... ..	10
,, notices issued for limewashing	... ..	10
,, notices issued for miscellaneous defects	... ..	13
,, bakehouses taken off the register during the year	... ..	1
,, bakehouses added to the register during the year	... ..	1

CONFECTIONERY BAKEHOUSES—

No. on register at end of year	...	...	...	...	...	...	...	22
No. taken off register during the year	...	...	...	...	...	...	...	—
No. added to register during the year	...	...	...	...	...	...	...	—
No. of visits and re-visits	...	...	...	...	...	...	...	51
No. found dirty (walls, ceilings and floors)	...	...	...	...	...	...	...	5
No. of notices issued for limewashing	...	...	...	...	...	...	...	5
" " " miscellaneous defects	...	...	...	...	...	...	...	3

OUTWORKERS--

No. of outworkers on register at end of year	...	...	...	...	...	1
„ visits and re-visits made to houses of out-workers	...	...	...	...	...	10
„ notices served for sanitary defects at houses of out-workers	...	...	...	...	...	—
Outworker employed in Litherland for Bootle firm:—						
Hosiery	...	...	...	...	...	1

APPENDIX 9.

PUBLIC HEALTH ACT, 1936—SECTION 343.

CONDITIONS IN OFFICES.

No. of Premises visited.	No. of Separ- ate Rooms inspected.	No. of Rooms found to be over- crowded on basis of 250 cu. ft. per person.	Ventilation.		Lighting.		Cleanliness.	Heating.	Washing Facilities.	Sanitary Accommodation.						
			Satis- factory (through)	Unsatis- factory (no through ventila- tion).	Natural, Artificial, satis- factory.	Natural, not satis- factory but suffi- cient with artificial.				Satis- factory provision (fire, stove, or radiator).	No pro- vision made.	Provision of wash hand basin, etc.	No pro- vision made.	Satis- factory provision of water closet where one sex only em- ployed.	Satis- factory provision of separ- ate water closet for sexes.	No pro- vision for separate water closet for sexes.
167	611	—	603	8	591	611	20	611	—	602	9	160	7	68	94	5

NOTE.—The standard of sufficiency as applied to sanitary accommodation is as follows :—

Where one sex only is employed, not more than 20 persons to one water closet, and adequate urinal accommodation for males.

Where both sexes are employed, not more than 10 persons to one water closet, and adequate urinal accommodation for males.

APPENDIX 10.
FOOD AND DRUGS (ADULTERATION) ACT, 1928.

SAMPLES TAKEN DURING THE YEAR 1938.

Nature of Article.	Total.	Number of Samples taken for Analysis.		Number found Adulterated or not up to Standard.	
		Informal	Formal	Informal	Formal
Butter	21	21	...	...	..
Beef Suet with Rice Flour	1	1	...	...	...
Baking Powder	1	1	..	...	...
Cake and Chocolate Roll	3	3	...	...	...
Cheese	6	6	...	..	...
Cream	1	1	...	...	..
Cocoa	2	2	...	...	...
Custard Powder	1	1	...	...	...
Coffee	1	1	...	...	...
Coffee and Mixture	2	2	...	...	...
Condensed Milk	12	12	...	...	..
Confectionery	1	1	...	...	...
Dripping	3	3	...	..	...
Flour	1	1	...	...	...
Ground Almonds	1	1	...	...	...
Jam	4	4	...	...	..
Lard	3	3	...	...	...
Lemon Cheese	2	2	...	...	...
Lemon Cheese and Curd	1	1	...	...	...
Lemon Barley Water Crystals ...	1	1	...	...	...
Milk	119	102	17	9	9
Margarine	20	20	...	...	...
Meat Paste	1	1	...	...	...
Mince Meat	2	2	...	...	...
Mustard	1	1	...	..	...
Mineral Water	1	1	...	...	...
Non-Alcoholic Wines	3	3	...	...	...
Olive Oil	1	1	...	...	...
Oatmeal	1	1	...	...	...
Pepper	3	3	...	...	...
Rice	2	2	...	...	...
Sausage	7	5	2	2	2
Self-Raising Flour	3	3	...	...	...
Salmon Creme	3	3	...	...	...
Salad Oil	2	2	...	...	...
Tinned Beans	1	1	...	...	...
Tinned Peas	3	3	...	...	...
Tinned Sild	1	1	...	...	...
Tinned Bristling	1	1	...	...	...
Tinned Salmon	2	2	...	...	...
Tinned Chicken, Ham and Tongue Roll	1	1	...	...	...
Tinned Crab	1	1	...	...	...
Tinned Grape Fruit	1	1	...	...	...
Tinned Sardines	1	1	...	...	...
Tinned Tomatoes	1	1	...	...	..
Tinned Cream	2	2	...	...	...
Tea	2	2	...	...	...
Vinegar	1	1	...	...	...
Totals	255	236	19	11	11

APPENDIX 11.

THE PUBLIC HEALTH (PRESERVATIVES IN FOOD)
REGULATIONS, 1925-1927.

Year 1938.

Nature of Article.	Number of samples examined for preservative.	Number of samples found correct.
Butter	21	21
Cake and Chocolate Roll ...	3	3
Cream and Tinned Cream ...	3	3
Custard Powder	1	1
Confectionery	1	1
Condensed Milk	12	12
Jam	4	4
Lemon Cheese and Curd	3	3
Lemon Barley Water Crystals	1	1
Meat Paste (potted) ...	1	1
Mince Meat	1	1
Mineral Water	1	1
Margarine	20	20
Milk	119	119
Non-Alcoholic Wines ...	3	3
Pepper	3	3
Sausages	7	7
Salmon Creme and Paste ...	3	3
Totals	207	207

APPENDIX 12.

RETURN relating to all persons who were treated at the TREATMENT CENTRE at
BOOTLE GENERAL HOSPITAL during the year ended the 31st December 1938.

	Syphilis.		Soft Chancre.		Gonor- rhoea.		Conditions other than venereal.		Totals.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Totals.
1. Number of cases on 1st January under treatment or observation.	71	25	5	—	201	39	10	6	287	70	357
2. Number of cases removed from the register during any previous year which returned during the year under report for treatment or observation of the same infection	19	4	—	—	50	4	—	—	69	8	77
3. Number of cases dealt with for the first time during the year under report (exclusive of cases under Item 4) suffering from:											
Syphilis, primary	9	—	—	—	—	—	—	—	9	—	9
,, secondary	15	3	—	—	—	—	—	—	15	3	18
,, latent in 1st year of infection	4	—	—	—	—	—	—	—	4	—	4
,, all later stages	3	8	—	—	—	—	—	—	3	8	11
,, congenital	3	3	—	—	—	—	—	—	3	3	6
Soft Chancre	—	—	9	—	—	—	—	—	9	—	9
Gonorrhoea, 1st year of infection	—	—	—	—	120	19	—	—	120	19	139
Gonorrhoea, later	—	—	—	—	20	9	—	—	20	9	29
Conditions other than venereal	—	—	—	—	—	—	39	20	39	20	59
4. Number of cases dealt with for the first time during the year under report known to have received treatment for the same infection, or to have been under observation, at other Centres ...	5	—	—	—	8	—	—	—	13	—	13
TOTALS OF ITEMS 1, 2, 3 & 4.	129	43	14	—	399	71	49	26	591	140	731
5. Number of cases discharged after completion of treatment and final tests of cure or after diagnosis as non-venereal ...	11	1	6	—	32	4	35	24	84	29	113
6. Number of cases which ceased to attend before completion of treatment and were, on first attendance, suffering from:—											
Syphilis, primary	7	1	—	—	—	—	—	—	7	1	8
,, secondary	11	3	—	—	—	—	—	—	11	3	14
,, latent in 1st year of infection	1	—	—	—	—	—	—	—	1	—	1
,, all later stages	1	8	—	—	—	—	—	—	1	8	9
,, congenital	—	7	—	—	—	—	—	—	—	7	7
Soft Chancre	—	—	—	—	—	—	—	—	—	—	—
Gonorrhoea, 1st year of infection	—	—	—	—	67	8	—	—	67	8	75
Gonorrhoea, later	—	—	—	—	19	11	—	—	19	11	30
7. Number of cases which ceased to attend after completion of treatment but before final tests of cure ...	8	1	—	—	29	4	—	—	37	5	42
8. Number of cases transferred to other centres or to institutions, or to care of private practitioners	24	—	7	—	48	3	—	—	79	3	82
9. Number of cases remaining under treatment or observation on 31st December	66	22	1	—	204	41	14	2	285	65	350
TOTALS OF ITEMS 5, 6, 7, 8 & 9.	129	43	14	—	399	71	49	26	591	140	731

(These totals should agree with those of Items 1, 2, 3 and 4)

APPENDIX 12 (continued).

	Syphilis.		Soft Chancere.		Gonorrhoea.		Conditions other than venereal.		Totals.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Totals
10. Number of cases in the following stages of syphilis included in Item 6 which failed to complete one course of treatment:											
Syphilis, primary	4	—	—	—	—	—	—	—	4	—	4
„ secondary	7	1	—	—	—	—	—	—	7	1	8
„ latent in 1st year of infection	1	—	—	—	—	—	—	—	1	—	1
„ all later stages	1	3	—	—	—	—	—	—	1	3	4
„ congenital	—	—	—	—	—	—	—	—	—	—	—
11. Number of attendances:—											
(a) for individual attention of the medical officers	2427	357	84	—	5395	608	295	88	8201	1053	9254
(b) for intermediate treatment, e.g., irrigation, dressing	—	—	—	—	3648	—	—	—	3648	—	3648
TOTAL ATTENDANCES	2427	357	84	—	9043	608	295	88	11849	1053	12902
12. In-patients:—											
(a) Total number of persons admitted for treatment during the year	2	1	—	—	2	1	—	—	4	2	6
(b) Aggregate number of "in-patient days" of treatment given	61	50	—	—	92	41	—	—	153	91	244
13. Number of cases of congenital syphilis in Item 3 above classified according to age periods											
	Under 1 year.		1 and under 5 years.		5 and under 15 years.		15 years and over.		Totals.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
	—	—	—	—	2	—	1	3	3	3	3
Arsenical.											
	Approved Arsenobenzene Compounds.				Others.		Mercury.		Bismuth.		
14. (a) Names of chief preparations used in the treatment of syphilis	Kharsulphan Neo-Kharsivan Sulpharsenol				—		—		Bismuth Metal and Bisglucol		
(b) Total number of injections given (out-patients and in-patients)	828				—		—		762		

APPENDIX 12 (continued).

	Microscopical		Cultural for Gonor- rhoea	Serum		Cerebro- spinal fluid	Others for diagnosis of Venereal Disease
	for Syphilis	for Gonor- rhoea		for Syphilis	for Gonor- rhoea		
15. Pathological Work:—							
(a) Number of specimens ex- amined at and by the medi- cal officer of the treatment centre	12	220	—	—	—	—	—
(b) Number of specimens from patients attending at the Treatment Centre sent for examination to an approved laboratory	—	211	—	266	—	—	—

Statement showing the services rendered at the Treatment Centre during the year, classified according to the areas in which the patients resided.

	Bootle.		Liverpool.		Lancashire.		Various.		Total.
	M.	F.	M.	F.	M.	F.	M.	F.	
A. Number of cases from each area included under the following headings in Item 3:—									
Syphilis	14	8	3	1	4	5	13	—	48
Soft Chancre	2	—	1	—	—	—	6	—	9
Gonorrhoea	60	19	15	4	31	4	34	1	168
Conditions other than vener- eal	16	13	7	1	6	6	10	—	59
TOTAL ...	92	40	26	6	41	15	63	1	284
B. Total number of attendances of all patients residing in each area	5842	649	2754	201	2891	202	362	1	12902
C. Aggregate number of "In- patient days" of all patients residing in each area	—	91	61	—	10	—	82	—	244

W. L. WEBB, M.B., Ch.B.,
RUTH NICHOLSON,

10th February, 1939.

Medical Officers of the Treatment Centre.

APPENDIX 13.
VENEREAL DISEASES.

Annual Return of Pathological Examinations made during the year ended on the 31st December, 1938:—

At the University of Liverpool—

Nature of Test.	Number of tests in respect of patients under care of:—		
	Treatment Centres.	Hospitals and other Institutions.	General Practitioners.
Microscopical—			
For detection of gonococci	207	11	—
Serum Tests—			
For Wassermann reaction	218	161	14
Cerebro-spinal Fluid Tests—			
For Wassermann reaction	—	—	—
Totals	425	172	14

APPENDIX 14.
WORK DONE BY THE WELFARE VISITORS.

Total visits paid	18218
First visits to infants	1508
Routine visits to infants	5444
Visits to children, aged 1 to 2 years	3417
Visits to children, aged 2 to 5 years	5249
First visits to expectant mothers	565
Routine visits to expectant mothers	618
Discharging Eyes—First Visits	23
„ „ Routine visits	6
Special visits to cases of Diarrhoea	8
„ „ Measles	501
Visits re Still-births	47
Visits re deaths from Cancer	5
„ cases of Pneumonia	112

APPENDIX 15.
ANTE-NATAL CLINICS.

JANUARY 1st to DECEMBER 31st, 1938.

Number of times Clinics opened	201
Number of attendances made	4683
Number of new cases	983
Number of patients under supervision at end of 1937	262
Normal labour	482
Stillbirth	18
Miscarriage	14
Difficult labour	21
Not pregnant	46
Left the district	24
Post-natal cases	—
Referred to Hospital or Maternity Home (including 4 of Caesarean Section)	373
Number under supervision at end of 1938	267
Wasserman—	
Positive	—
Negative	2
Smears taken for Gonococci—	
Positive	—
Negative	—

APPENDIX 16.

TODDLERS.

	Age Group.			Total.
	2—3 yrs.	3—4 yrs.	4—5 yrs.	
CHILDREN EXAMINED ...	325	221	43	589
Defects,				
1. Dental caries and mouth condition ...	66	71	25	162
2. Alimentary system (constipation, worms, etc., diarrhoea)	36	18	5	59
3. Rickets in any of its manifestations ...	87	29	5	121
4. Subnormal nutrition and anaemia ...	59	27	6	92
5. Nervous, difficult and unstable children	26	18	3	47
6. Debility following infectious disease ..	37	27	—	64
7. Circulatory system	10	6	—	16
8. Eye, nose and throat	47	46	4	97
9. Respiratory disease and catarrhs ...	20	15	1	36
10. Skin and scalp diseases	60	33	6	99
11. Eye defects	35	37	6	78
12. Infectious disease	2	3	1	6
13. Affections of nervous system and defective brain development	3	6	1	10
14. Speech defects	8	3	1	12
15. Various	47	18	4	69
TOTAL ..	543	357	68	968
References to Agencies,				
A. Dental Clinic	18	33	19	70
B. Ultra Violet Ray Clinic... ..	38	8	1	47
C. Ear or Nose or Throat Clinic	23	14	—	37
D. Massage and Orthopædic... ..	16	15	—	31
E. Ophthalmic Clinic	18	17	—	35
F. Convalescent Home	7	2	8	17
G. Skin Department	2	2	—	4
H. Own Doctor	5	2	2	9
I. Hospital	1	1	—	2
J. Chest Clinic	4	1	—	5
K. District Nurse	3	7	1	11
TOTAL ...	135	102	31	268

RETURN to be made on or before the 14th of February, 1939, by Mr. N. Lockwood, Vaccination Officer of the Bootle Registration District, respecting the Vaccination of Children whose births were registered from 1st January to 31st December 1937, inclusive.

Registration Sub-Districts comprised in the Vaccination Officer's District.	Number of Births returned in the "Births List" Sheets", as regis- tered from 1st Jan., to 31st Dec. 1937.	Number of these Births duly entered by 31st January, 1939, in Columns I., II., IV. and V. of the "Vaccination Regis- ter" (Birth List Sheets), viz.:				Number of these Births which on 31st January, 1939, remained un- entered in the "Vaccination Register" on account (as shown by "Report Book") of				Number of these Births remaining on 31st January, 1939, neither duly entered in the "Vaccination Register" (columns 3, 4, 5, 6 and 7 of this Return) nor temporar- ily accounted for in the "Report Book" (columns 8, 9 and 10 of this Return.	*Total number of Certificates of Successful Primary Vaccination of Children under 14 received during the Calendar Year 1938.	Number of Statutory Declarations of Conscien- tious Objection received by the Vaccina- tion Officer irrespective of the dates of birth of the children to which they relate, during the Calendar Year 1938.
		Col. I. Success- fully Vaccin- ated.	Col. II. Inaus- ceptible of Vac- cination.	Col. III. Had Small Pox.	Col. IV. Number in re- spect of whom Statu- tory Declara- tions of Con- scien- tious Objection have been received.	Col. V. Died Unvac- cinated.	Postpone- ment by Medical Certi- ficate	Removal to Districts the Vaccina- tion Officers of which have been duly appraised.	Removal to places unknown, or which cannot be reached. and Cases not hav- ing been found.			
1	2	3	4	5	6	7	8	9	10	11	12	13
BOOTLE ...	1141	919	12	—	99	53	7	12	27	12	1193	126
Total ...	1141	919	12	—	99	53	7	12	27	12	1193	126

N. LOCKWOOD, Vaccination Officer.

8th February, 1939.

NOTE.—The total of the figures in columns 3 to 11 should agree with the figure in column 2. Any cases of children successfully vaccinated after the declaration of conscientious objection had been made should be included in column 6 above and not in column 3. The number of such cases should be inserted here:—Nil.

*The total in this column should be the number of Certificates of successful primary vaccination of children under 14, actually received during the year, including any relating to births registered in previous years. The total thus given should include the Certificates of successful primary vaccination, of which copies have been sent to Vaccination Officers of other Districts. The total number of Certificates for the year 1938 sent to other Vaccination Officers should be stated here:—376.

APPENDIX 18.

LINACRE HOSPITAL.—REVISED DIAGNOSES AND COMPLICATIONS.

SCARLET FEVER ADMISSIONS.	Booth	Lith- land	Form- by	DIPHTHERIA ADMISSIONS.	Booth	Lith- land	Form- by
Re-diagnosed as:—				Re-diagnosed as:—			
Scarlet Fever and Burns ...	3	—	—	Diphtheria and Burns ...	1	—	—
" " and Chickenpox ...	3	—	—	" " and Measles ...	1	—	—
" " and Lobar Pneumonia ...	—	1	—	" " and Mumps ...	1	—	—
" " and Pertussis ...	2	—	—	" " and Scarlet Fever ...	1	—	—
Diphtheria ...	1	—	—	Adenitis ...	1	1	—
Erythema ...	4	2	—	Bronchitis ...	1	1	—
" " ...	—	1	—	Laryngitis ...	4	2	—
" " and Pertussis ...	1	—	—	Measles ...	3	—	—
Febricula ...	—	—	—	Mumps ...	—	1	—
Tonsillitis ...	2	—	—	Pertussis ...	1	—	—
				Lobar Pneumonia ...	1	—	—
				Quinsy ...	4	—	—
				Rhinitis ...	1	—	—
				Stomatitis ...	1	—	—
				Tonsillitis ...	40	9	1
				Vincent's Angina ...	1	—	—
Totals ...	16	4	—	Totals ...	62	14	1

APPENDIX 19.

METEOROLOGICAL DATA FOR YEAR 1938.

Supplied by the Liverpool Observatory and Tidal Institute.

Month.	Mean Barometer.	Mean Temperature.	Rainfall.	Mean Cloud.
January ...	29·793 ins.	43·5°	2·705 ins.	7·5
February ...	30·256 ins.	42·5°	0·425 ins.	8·1
March	30·208 ins.	48·3°	1·020 ins.	7·0
April	30·347 ins.	47·0°	0·220 ins.	6·2
May	29·945 ins.	51·3°	2·657 ins.	7·3
June	29·965 ins.	55·9°	2·646 ins.	7·3
July	29·899 ins.	57·8°	2·713 ins.	7·5
August ...	29·969 ins.	60·0°	4·335 ins.	7·5
September ...	29·985 ins.	56·9°	1·676 ins.	8·1
October ...	29·783 ins.	51·5°	4·008 ins.	7·6
November ...	29·715 ins.	49·1°	3·181 ins.	7·0
December ...	29·817 ins.	41·0°	3·315 ins.	7·2
Year	29·974 ins.	50·4°	28·901 ins.	7·4

APPENDIX 20.

LOCAL POWERS RELATING TO PUBLIC HEALTH.

(1) ACTS OF PARLIAMENT ADOPTED BY THE COUNCIL.							Dates provisions became operative.
Infectious Disease (Prevention) Act, 1890, sections 4, 16, 18, 21	11	Oct.,	1893				
Public Health Acts Amendment Act 1890, sections 28, 29, 30, 31, 34, 35, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46 and 50 ...	11	Oct.,	1893				
Public Health Acts Amendment Act, 1907, section 95 ...	11	Dec.,	1908				
Public Health Acts Amendment Act, 1907, sections 22, 33, 53 and 54 ...	20	Feb.,	1915				
Public Health Act, 1925, sections 13, 14, 15, 16, 17, 18, 19, 21, 22, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33 and 35 ...	1	Dec.,	1926				
(2) BOOTLE CORPORATION ACTS AND ORDERS—							
Bootle Corporation Act, 1890 ...	1	Sept.,	1890				
Bootle Order, 1897; confirmed by the Local Government Board's Provisional Orders Confirmation (No. 16) Act, 1897, relative to Sanitary Improvements ...	24	Mar.,	1897				
Bootle Corporation Act, 1899 ...	8	Aug.,	1899				
Bootle Corporation Act, 1905 ...	9	Nov.,	1905				
Bootle Order, 1914; confirmed by the Local Government Board's Provisional Orders Confirmation (No. 6) Act, 1914, relating to the substitution of moveable ashpits for fixed ashpits ...	13	Mar.,	1914				
Bootle Corporation Act, 1920 ...	31	Mar.,	1921				
Bootle Order, 1927; confirmed by the Ministry of Health's Provisional Orders Confirmation (No 4) Act, 1927, relating to the substitution of ashbins for ashpits ...	24	Mar.,	1927				
Bootle Corporation Act, 1930 ...	1	Aug.,	1930				
(3) BYE-LAWS AND REGULATIONS IN FORCE IN THE BOROUGH--							
Slaughter Houses, 1887 ...	26	May,	1887				
Nuisances, 1887 ...	7	Nov.,	1887				
Common Lodging Houses, 1894 ...	25	June,	1894				
Carriage of Offensive Matter through Streets, 1898 ...	26	July,	1898				
Hospitals provided by the Corporation, 1904 ...	10	June,	1904				
New Streets and Buildings, 1927 ...	31	Oct.,	1927				
Removal of Refuse from Premises and the Cleaning of Privies, etc. (Repeal of former Bye-laws) ...	16	Dec.,	1929				
Smoke Abatement Bye-laws, 1930 ...	15	Dec.,	1930				
Houses let in Lodgings, or occupied by members of more than one family ...	19	May,	1931				
Nursing Homes ...	10	Dec.,	1931				
New Buildings ...	21	April,	1932				
Howe Street Improvement Area ...	21	Sept.,	1932				
Miller's Bridge Improvement Area ...	1	Oct.,	1934				
Howe Street Improvement Area ...	1	Oct.,	1934				

